

Notification of Family & Domestic Violence Hardship

Account Holder Details

Full Name:

Mailing Address:

Contact Number:

Email Address:

Date of Birth:

Authorised Representative Details

[to be completed if an Authorised Representative is completing the form on the Account Holders behalf]

Full Name:

Street Address:

Suburb: State: Postcode:

Mailing Address:

Contact Number:

Email Address:

Date of Birth:

Account Details

NeoGrids Account Number:

Serviced Provided by NeoGrids: Electricity Hot Water Other

Premise Street Address:

Suburb: State:

Postcode:

Details of Notification

Nature of Notification:

(please select the appropriate option below)

- I am experiencing family and domestic violence.
- Someone in my household is experiencing family and domestic violence.

Affected Services:

- Electricity Account
- Hot Water Account
- Both

Are you requesting account adjustments or special arrangements?

- Yes
- No

Please specify any special requests or arrangements needed (e.g., bill deferral, particular payment arrangement, change of contact details, added security measures):

Supporting Documentation

Please attach any supporting documentation that may assist us in processing your request, **this is optional and not required.**

This could include:

- A letter from a support service or case worker.
- A medical certificate.

A police report or restraining order.

Confidentiality

NeoGrids is committed to maintaining the confidentiality of your information. We will take all necessary steps to ensure your safety and privacy. Information provided in this form will only be used for the purpose of assisting with your situation.

Declaration

I declare that the information provided in this form is true and accurate to the best of my knowledge.

Signature:

Date:

Submission Instructions

Email: support@neogrids.com

Mail: NeoGrids Customer Support

Level 19, 180 Lonsdale Street,

Melbourne VIC 3000

NeoGrids Office Use Only

Received By:

Date Received:

Reference Number:

Action Taken: