New Jersey Natural Gas

Account Number:

NJNG LIFE-SUSTAINING EQUIPMENT CERTIFICATION

Completed and signed applications must be returned within 15 days.

New

Recertification

No Longer Require Protection

CUSTOMER'S CERTIFICATION		
1. CUSTOMER / PATIENT INFORMATION (REQUIRED FROM CUSTOMER)		
Customer of Record:	Email Address:	
Telephone Number:	Is this a Mobile Number? Yes No	
Service Address:		
Patient's Name:	Patient's DOB:	
Should this phone number be considered your primary contact number	? Yes No	
The Patient above: DOES DOES NOT use life-sustaining equipment.		
If you selected "does," your prescribing licensed medical professional must complete section 2.		
If you answered, "does not," please continue to section 3.		

MEDICAL CERTIFICATION

2. MEDICAL CERTIFICATION (REQUIRED FROM PRESCRIBING LICENSED MEDICAL PROFESSIONAL)

Medical Professional's Name:	
Practice and/or Specialty:	
Office Address:	
Office Phone:	_ Office Fax:
State License Number:	_ Patient's Last Exam Date:
Equipment Type:	_ Equipment Model #:

Prescribing Licensed Medical Professional Signature

3. OTHER MEDICAL CONDITIONS

If you have a serious medical condition that does not require life-sustaining equipment, but that would be aggravated if there was a loss of natural gas service, you may submit one of the following:

- Doctor's note within the past 30 days (the exact nature of the condition should not be shared)
- Hospital discharge paperwork dated within the past 30 days (showing an overnight hospital stay)
- Paperwork from Home Hospice Care

Please email the	Or mail to:
completed form to customercare@njng.com.	New Jersey Nat
customercare@njng.com.	Attn: Customer
	1415 Wyckoff Ro

New Jersey Natural Gas Attn: Customer Service 1415 Wyckoff Road Wall, NJ 07719 To sign-up for N.J.'s Register READY program, please call 211 or go to registerready.nj.gov. Registry is designed to help emergency responders locate and safely evacuate people who could find it difficult to help themselves in the event of a major disaster.