

Dear Sir / Madam

Many thanks for your request for information regarding our Lifeline community alarm service.

We hope you will see from the enclosed leaflet the benefits the Lifeline service response alarm has to offer.

Lifeline offers peace of mind and reassurance by ensuring that at a simple touch of a button there is always someone there.

Lifeline will allow you to continue living your life to the full, independently and safely in your own home. You can contact the service at any time as it is available twenty four hours a day, every day of the year.

If you have any more questions please do contact us. There is no waiting list and your Lifeline will be installed within ten working days.

If you decide you would like to go ahead and have Lifeline installed, please complete and return the Client Application and Service Agreement forms.

Remember to sign and return the VAT exemption form if you are applicable.

Yours faithfully,

Support Services Administration Officer
Tel: 01480 428562

Lifeline Client Application Form

Please complete and return

| CLIENT DETAILS | | |
|------------------------------|---------------|--|
| Mr / Mrs / Miss / Ms / Other | Date of birth | |
| Surname | | |
| First name(s) | | |
| Telephone number | | |

| KEY DETAILS | |
|-------------------------|--|
| Do you have a key safe? | |
| Location of key safe | |
| Key safe number | |
| Location of spare key | |

| ADDRESS DETAILS | Address of Lifeline applicant | Invoice address (if different) |
|---------------------------|-------------------------------|--------------------------------|
| House name / number | | |
| Street name | | |
| Town | | |
| City | | |
| County | | |
| Postcode | | |
| Socially rented / private | | |

| DOCTOR'S DETAILS | |
|------------------|--|
| Doctor's name | |
| Surgery name | |
| Telephone number | |

| FOR ADMIN USE ONLY | |
|------------------------|--|
| Client ID number | |
| Alarm type | |
| Pendant type | |
| Rent / purchased | |
| Machine serial number | |
| Location of new system | |

Medical Information

Please provide details where relevant

| MEDICAL DETAILS | | |
|--|------------------------|--|
| Do you have any medical conditions we should be aware of? | | |
| Do you take any medication for your condition? | | |
| Any mobility problems, do you walk with an aid? Are you prone to falls? | | |
| If you have visits from a regular carer please provide details. | Care provider's name | |
| | Contact number | |
| | No. of visits per week | |
| | Approx. time of visits | |

| EMERGENCY CONTACT DETAILS | | | |
|---------------------------|--|--|--|
| Name | | | |
| Address | | | |
| Home number | | | |
| Work number | | | |
| Mobile number | | | |
| Relationship | | | |
| Keyholder | | | |

Cambridgeshire County Council provide an Emergency Response service (ERS) to assist in non-emergency situations. If you do not wish us to provide relevant information about you in order to aid the work of the ERS please sign and date to let us know. **SIGNED BY:**

Client

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

| |
|------------|
| Print name |
|------------|

Chorus Homes (Admin)

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

| |
|------------|
| Print name |
|------------|

Please note: All prices are subject to VAT, however in special circumstances people who are either chronically ill or disabled can be exempt from paying VAT.

Rental Scheme:

If you wish to rent a unit you will pay:

| | |
|-------------------------------|--------------|
| Rental of equipment | £4.51 |
| Installation of equipment | |
| Connection to Central Control | |
| Administration costs | |
| 20.0% VAT | £0.90 |
| Total due per week | £5.41 |

Delivery and Installation:

There is a £60 delivery and installation fee.

Purchase Scheme:

If you wish to buy your own unit you will pay for the cost of the equipment and a weekly charge for connection to Central Control.

| | |
|-------------------------------|----------------|
| Lifeline Equipment | £176.15 |
| 20.0% VAT | £35.23 |
| Total Cost of Purchase | £211.38 |

| | |
|-------------------------------|-------|
| Connection to Central Control | £2.62 |
| 20.0% VAT | £0.52 |

Delivery and Installation:

There is a £60 delivery and installation fee.

Keysafe:

A keystore can be purchased at a cost of £75

PLEASE NOTE: WE DO NOT INSTALL KEYSAFES

Payment

The client will be sent an invoice and charges may be paid by monthly Direct Debit, cheque payment or credit / debit card.

Lifeline VAT Exemption Form

Please sign and return.

All prices are subject to VAT at the current rate unless you can declare you are chronically sick or disabled.

Chronically sick means you have an illness which is likely to last a long time, for example, arthritis, diabetes, or heart problems such as angina.

Disabled means a physical or mental impairment which has a substantial and long term adverse effect on a person's ability to carry out normal day to day activities. You do not have to be registered disabled to claim relief from VAT, but the nature of your illness or disablement must be specified.

Declaration

I declare that I am chronically sick or disabled, suffering from the medical condition of:

I am receiving Lifeline equipment from Chorus Homes, Brook House, Ouse Walk, Huntingdon, PE29 3QW and claim relief from VAT under Group 14 of Schedule 5 of the Value Added Tax Act 1983.

Name

Address

 Postcode

Telephone number

User signature

 Date



SERVICE AGREEMENT - Please sign and return

This agreement is between Chorus Homes and _____
(Name of User / User representative) for the provision of the Lifeline service.

The agreement will commence from the date of signing by Chorus Homes and will continue until confirmed by notification of termination and return of the Lifeline equipment. Please sign this agreement. A copy will be sent to you once received and signed by the Chorus Homes.

Chorus Homes will:

1. Provide, install and maintain equipment (including initial testing)
2. Repair or replace any faulty equipment as soon as is practical during normal office hours. Please be aware that we do not offer an out of hours service.
3. Ensure that the North Herts Careline will respond to calls made from the LifeLine equipment, at all times, day or night
4. Ensure that, on receiving a call for assistance, the call centre will take immediate action to contact a key holder, Cambridgeshire County Council Emergency Response Service (ERS) or a Doctor or the emergency services as most appropriate.
5. Not accept responsibility for delays in answering the User due to problems with Users telephone line being faulty or occupied by answer machine, fax machine, internet connection or other telephony equipment (or from adverse weather conditions)
6. Reserve the right to:
 - i. End the LifeLine service in cases of non-payment or misuse
 - ii. Review the price of the service fee and to notify the User / User representative of any change in service fee charge with one month's written notice.

The Client will:

1. Pay the installation fee in advance.
2. Pay the service fee in advance either monthly or quarterly. Failure to do so may result in the service being terminated.
3. Provide personal details as required by Chorus Homes and inform of any changes in these and key holders details
4. **Test the Lifeline equipment at least once a month to ensure that it is working properly**
5. Not misuse or damage the equipment in any way
6. Report faults or defects in the equipment to the Chorus Homes as soon as possible
7. Give 28 days written notice if you decide to cancel the agreement and return the equipment to Brook House, Ouse Walk within 7 working days.

General

It must be fully understood that Chorus Homes does not itself operate a response system. Operators will deal with all calls by contacting the User.

Signature - User / User representative _____

Print name _____ Date _____

Signature - Chorus Homes member _____

Print name _____ Date _____

KEEP YOUR DETAILS UP TO DATE!

It is VERY important, and in your own interest to keep your details updated.

Please contact us if there is any change in your details such as:

- **Change of address**
- **Change of telephone number**
- **Change in medical details which will affect your use of the Lifeline service**
- **Change in your key holders**
- **Change to your key holders information**
- **Any change in details**

To inform us of any change in your details please call:

THE LIFELINE TEAM 01480 428562

Our ability to provide the best quality Lifeline service depends on us having up to date information about you.

We rely upon you to keep us informed of any changes that may be relevant to your use of the Lifeline service.