

Harborough Lifeline

Local, 24 hour support at the touch of a button



APPLICATION PACK



Harborough Lifeline Costs 2025/26

Set-up Fee / Initial Charge (One off Charge): £98.00 (£117.60 inc. VAT) standard

£128.00 (£153.60 inc. VAT) Additional Peripheral Equipment

Basic Lifeline Package: * Lease of Lifeline unit, pendant & 24/7 monitoring

£4.65 per week (£5.58 inc. VAT)

Many lifeline customers will be exempt from the payment of VAT on Lifeline charges providing they meet the conditions on the 'VAT Exemption Form'

For an additional cost we can also provide optional sensors which can be programmed to your lifeline unit enabling us to respond quickly to any potential emergency. Additional pendants and fall pendants are available. Please contact us on 01858 464499 to discuss individual requirements and costs.

After sign-up, our Finance team will work out what you owe for the remainder of the **financial** year, (from the set-up date to 31st March). The amount you owe is then spread across the monthly direct debit payments.

The number of monthly Direct Debits will vary depending upon your specific service / set-up date. Our Finance team will provide you with a minimum of 10 working days' notice of your first Direct Debit payment. The payment will be taken on around the 25th of the month.

If you choose to spread the set-up fee across the monthly direct debit payments, then the set-up fee and the ongoing Lifeline service costs will be combined and spread out evenly over the year.

If you opt **not** to spread the set-up fee over your first year, the first direct debit amount will be £98.00 or £128.00 if additional peripheral equipment is required, and the total hire of your ongoing Lifeline service will be collected over the remaining Direct Debits.

Note that VAT which is calculated at 20% is not included in the details above.

Clients signing up during February and March may not be invoiced until the new financial year. Therefore, the subsequent year's invoice may be slightly higher as it will include weekly fees for the previous financial year and set-up fee. This will be spread across the 12 months.

*The weekly charge of £4.65 covers our standard package of a Lifeline unit and pendant. It does not include the cost of any additional telecare products such as fall detectors or smoke alarms etc.

Terminating your service

If you wish to discontinue the service, please let us know promptly. The termination date for the contract and the last date that we charge for will be the date on which we cease monitoring. **After the termination** date we will be unable to respond to alarms. A Freepost envelope will be sent to your address to enable you to return the equipment quickly and safely.

	Office only Client ID							
	Supply First Client Details.							
Title			ıs					
First Name(s)					Surname			
Date of Birth								
	•							
Address								
Post Code						E-Mail		
Home Tel Nº				Mol	bile Nº			
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Your Health Information Doctor Telephone N°							
Name of Organisation			Medical Inf	ō			
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Your Home Care Information Telephone N° How often do they visit? Your Key Safe Information Key Safe Code Location of Key Safe Location of Key Safe Information How do you wish to wear the Pendant (Circle) Receive via post, pre-programmed unit. Send to: (details) Set-up Requirement Lifeline to arrange visit through contact: (details) Supplementary Information: Telephone providers are increasingly changing all telephone connections from analogue to digital; it is helpful if we know whether your line has been upgraded, but not essential. Don't worry if you're not sure. With our Permission to Discuss form some customers feel happier knowing that a friend or relative can discuss your Lifeline personal information if there are any changes in your circumstances, such as a change in phone number, key holder, medical condition, etc. This is entirely optional, and we will only contact the nominated person if it's absolutely necessary. It is the responsibility of the customer to update Harborough Lifeline if your personal information changes especially medical. Directions to property if difficult to find Data Consent: For the purposes of the GDPR + Data Protection Act 2018. At Lifeline we take your privacy seriously and will only use your information to administer your account and to provide help from emergency services + health professionals that you may request. I AGREE Signad			Surgery				
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Title

Supply Second Client Details.

Prefers to be addressed as

First Name(s)			Surnar	ne						
Date of Birth										
	_									
Address										
Post Code					E-Mail					
Home Tel Nº			Mobile	e Nº						
An emerge contacted o	An emergency contact should be a friend or relative who lives near you, who has a telephone, and who is willing to be contacted on your behalf in an emergency									
Ye		F Medical Info								
Na										
Your Hea		H								
Information	on	F Doctor		Tel			Tele	phone N°		
		Surgery								
Υ		1								
Name in Full								Post Code		
		Home Tel Nº				Mobile	Nº			
		Relationship				Key Ho	lder		Yes / No	
Your Respo	nders	Responder 3 Addres	ss							
Name in Full								Post Code		
		Home Tel Nº				Mobile	No.			
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		Relationship				Key Ho	ider		Yes / No	



Harborough Lifeline Peace of mind in your own home.

Name of Organisation

VII	0	Address							
Your Home Information	Care			•				Post Code	
		Telephone Nº							
		How often do	they visit?						
Your Key Sa	ıfe	Key Safe Code	е						
Information		Location of Ke	ey Safe						
Supplementa	ry Inform	nation:							
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It is the respons	sibility of th	e customer to up	date Harborou	ugh L	feline if your po	ersonal in	formatio	n changes esp	ecially medical.
Directions to pro	operty if dit	fficult to find							
	nformation					om emerç			ey seriously and wi n professionals tha

Please return to: FREEPOST RTKE-KBGS-TTST

Declaration to claim for Exemption from Payment of VAT

Unit Ident:	
Ref:	

PART A: FOR COMPLETION BY THE CLIENT

H.M. Customs and Excise will allow exemption from payment of VAT on any Lifeline Charges provided the applicant is chronically sick or disabled (See "Relevant Extracts" on the reverse).

on the reverse).			`
Client :			
Address :			
Postcode :		Telephone :	
I declare that I a	m chronically sick or ha	ave a disabling c	condition by reason of:
	eceiving from Harborou	gh District Cou	e description of your condition) ncil, Adam & Eve Street, Market
	n value added tax.	or monitoring a	personal alarm call system, and I
Client :	Signature:		Date:
Harborough, con	tive of Harborough I	District Council f monitoring a p	HE SUPPLIER , Adam & Eve Street, Market personal alarm call service, for the person named above.
Installer :	Signature:		Date:



Please return to:

Harborough Lifeline,
Harborough District Council,
The Symington Building
Adam & Eve Street
Market Harborough

Market Harborough Leics., LE16 7AG (Tel: 01858 828282) ALL OF THE INFORMATION GIVEN ON THIS FORM WILL REMAIN PRIVATE AND CONFIDENTIAL AND WILL NOT BE DISCLOSED TO ANY THIRD PARTIES.

Customs & Excise Notice 701/7 "VAT Reliefs for Disabled People"

H M Customs and Excise state that the provision of the Lifeline Alarm Service, is subject to the standard rate VAT (currently 20%).

However, exemption from VAT can be obtained for persons who are chronically sick or disabled. They consider a chronically sick or disabled person to have:

- A physical or mental impairment which has a long term and substantial adverse effect upon his/her ability to carry out everyday activities.
- A condition which the medical profession treats as a chronic sickness, such as diabetes.
- A terminal illness.

However, it does **NOT** include a frail elderly person who is otherwise ablebodied, or a person who is temporarily disabled or incapacitated, such as with a broken limb.

To claim exemption from VAT, you should complete the declaration form overleaf.

Important Note:

Please be aware that there are penalties for making a false declaration and for fraudulent evasion of VAT.







Please fill in the whole form including official use box using a ball point pen and send it to:

Harborough District Council Exchequer Services Council Offices Adam and Eve Street Market Harborough LE16 7AG

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Bank/bui	ilding soc	iety ac	count	num	ber						
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ranch s	ort code						_				
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Instruction to your bank or building society to pay by Direct Debit

Service user number

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						USE ONLY or building society.	
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Signatur	e(s)						
Date							

Banks and building societies may not accept Direct Debit Instructions for some types of account

DDI1

This guarantee should be detached and retained by the payer.

The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit Harborough District Council will notify you at least 10 working days in advance of your account being debited or as otherwise agreed. If you request Harborough District Council to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by Harborough District Council or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society
 - If you receive a refund you are not entitled to, you must pay it back when Harborough District Council asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.



Harborough Lifeline Peace of mind in your own home.

Office only Client ID \ FMS



Permission to Discuss: Financial Details (if No Power of Attorney)

Change of Personal Details

on my behalf with officers	hereby authorise the following person(s) (please list in box below) to act who are dealing with my affairs at Harborough District Council. I give permission for the al / sensitive personal data with these named persons.
The person(s) named below between yourselves (please	will only be able to act on your behalf if they quote a password that has been agreed enter in box below).
Financial Details (if No Po	ver of Attorney) – State name of friends and / or relatives & password permission.
Signed: (Service User)	Daytime Telephone No (Authorised Person) Date
Change of Personal Detai	_– State name of friend or relative & password permission.

Please return your completed form to the address below:

<u>lifeline@harborough.gov.uk</u> or to Harborough Lifeline, Harborough District Council, The Symington Building, Adam & Eve Street, Market Harborough, Leicestershire, LE16 7AG.

This is in compliance with the General Data Protection Regulations.

Privacy Notice

Under Article 6(1) (a) (consent) (d) vital interest and (e) (public interest) of the general Data Protection Regulations, we are permitted to use data for our tasks; data protection law describes this legal basis for handling your information. It will be used by Harborough District Council and our partners to deliver and improve services and fulfil our statutory delivery. We will not enclose any personal information to any other third parties unless required or allowed to do so by law.

Read more about how we use personal data on our privacy notice page via our:

http://www.harborough.gov.uk/information

Or write to the council at: Information Governance, Harborough District Council, The Symington Building, Adam & Eve St, Market Harborough, LE16 7AG or FOI@harborough.gov.uk

Yours Sincerely

Harborough Lifeline



How did you hear about Harborough Lifeline?

First Contact

Other (please specify)

We're always interested to know where you first heard about our service or who recommended us!

Please tick the relevant box(es) below and add any additional details alongside.

Thank you.

Leaflet / Flyer

Magazine

Council Website

Radio

Promotional Talk

Promotional Event

Recommended by a Friend / Family
 Are you aware of how they knew about us?

Recommended by hospital, health, social care

Recommended by another professional

Leicestershire County Council