

Service Protection Scheme application form

Part A. About you (To be signed by the Plusnet account holder)

Name:

Plusnet username:

Home phone number:

I want to set up the person named in Part B as a billing nominee on my account. I understand how the scheme works and that the nominee will receive communications relating to any failed payments of bills on my account.

Signature:

Date:

Part B. About your nominee (To be signed by the person you choose as a contact if we cannot get in touch with you)

Name:

Contact phone number:

Email address:

Address:

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Postcode:

I agree to act as billing nominee for the person named in Part A. I understand how the scheme works, that the personal information I've provided above will be used as part of the scheme, and that I will not be personally liable for the account holder's Plusnet bills.

Signature:

Date:

Please fill in all the details required above and return the form in the post to:

Plusnet
(Service Protection Scheme)
The Balance
2 Pinfold Street
Sheffield
S1 2GU

For full details of the scheme please visit us at <https://www.plus.net/help/legal/accessibility-general-services/>