

Electrical Partners Portal User Guide



Making a Claim for Electrical Contractor Fees

February 2019



Contents

Contents	1
Claiming for Contractor Fees	2
Benefits of Using the Electrical Partners Portal	2
How to Submit a Claim	2
Claim Summary.....	3
Claimant Details	4
Claim Details	4
Claim Items	4
Attachments	5
Declaration	6
Submission.....	7

Claiming for Contractor Fees

We will pay reasonable charges for work done by a licensed electrical contractor if there's been:

- Loss of supply to a customer's hot water system caused by a fault with our equipment (bridging relay) that supplies power to the hot water system. You need to let us know as soon as possible about the fault and get a service order number.
- Loss of supply to a customer's home caused by a fault in our electricity distribution network. You need to let us know as soon as possible about the fault and get a fault call number.

We can reimburse for work that directly relates to an Ergon Energy fault. Reasonable charges include a standard call out fee and, where applicable, standard hourly rates for work completed.

Benefits of Using the Electrical Partners Portal

Using the portal, rather than submitting your invoices via email, will result in a faster turnaround time in payment.

How to Submit a Claim

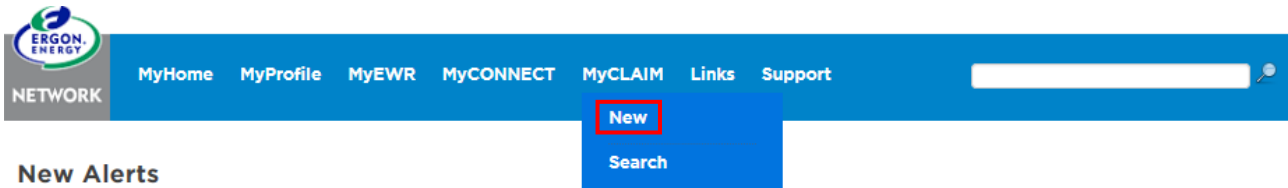
Registered Users are able to submit an on-line claim via the Electrical Partners Portal. Ensure you include the following information:

1. Service order number/fault call number
2. Your name
3. Business name
4. Business address
5. ABN
6. Licence number
7. Phone number
8. Email address
9. A scanned copy of your tax invoice

IMPORTANT

If you haven't yet registered for the EP Portal, please follow the instructions in the EP Portal – How to Register Guide.

To submit a new claim, from your Home Page, click on **MyCLAIM ~ New**.



Claim Summary

Select the **Contractor Fee** from the drop down **Category** field.

You will need to advise whether it was outage related and provide the invoice number and date and also **attach** the invoice to the claim.

Click on **Attach Invoice**.

Search for the document that you wish to attach to the claim. **Select** it and click **Open**.

When you attach your document, it will appear in the **Attachments** section. You can View it or Remove it if you wish.

Liability Claim Form

Claimant Details

Enter the details for the Claimant. (Note: These are your details)

Claimant Details

Claimant Type	<input checked="" type="radio"/> Business <input type="radio"/> Residential	Postal Address	
Business Name	<input type="text" value="Peter Piper Electrical"/>	Street Address	<input type="text"/>
ABN	<input type="text"/>	Suburb	<input type="text" value="Norman Gardens"/>
Home Phone Number	<input type="text"/>	State	<input type="text" value="Queensland"/> ▼
Mobile Phone Number	<input type="text"/>	Postcode	<input type="text" value="4701"/>
Claimant Email	<input type="text" value="test@test.com.au"/>		

Claim Details

In this section, please enter all the details of how the loss/damage occurred, the incident date and time. You have 300 characters. (Note: The "Time" field is not mandatory.)

Claim Details

Describe how the loss/damage occurred	<input type="text" value="Outage"/>
Incident Date	<input type="text" value="03/02/2019"/> 📅 (DD/MM/YYYY)
Time of Incident	<input type="text"/> (E.g. ... 15:30)

Claim Items

Click on **Add Item**

Claim Items

Add Item

Claim Total (excl. GST) \$


Enter as many details as possible.

The **Value** and **Street Address** fields are mandatory. The **Street Address** field is the address where you attended the fault. (Note: The "NMI" field is not mandatory.)

If there is more than 1 item to add to the claim, click on **Add Item** to include them in this claim.

Claim Items

Item Ref: 1

Outage Id: 19MK123456 

Value(excl. GST) \$ 85

GST Registered? Yes No

Street Address Suburb Walkerston

NMI State Queensland

Inspection Report Yes No Postcode 4751

Additional Information

Add Item

Claim Total (excl. GST) \$ 85.00

Attachments

You are also able to attach any documents you feel would assist in evaluating your claim. Attachments could include quotes, photographs, etc.

Click on **Add Attachments**.

Attachments

Add Attachments

You currently have no attachments.

Search for the document that you wish to attach to your Claim. **Select** it and click **Open**.

When you attach your document, it will appear under Attachments. You can View it or Remove it if you wish.

Attachments

Add Attachments

You currently have 1 attachment.

#	File Name	AV Scan Status	Size	Date Uploaded	
1	Test Invoice.docx	No Virus exists	12.47 KB	5/02/2019 8:50 AM	View Remove

NEED TO KNOW

- The system will complete a scan on the document to ensure no viruses exist. Once completed, AV Scan Status of Awaiting Scan will change to Completed.
- You can attach up to **five files at 4 MB each**.
- The allowed file types are jpg, jpeg, gif, png, raw, bmp, tif, pdf, doc, docx, txt, xls, xlsx, dwg and dxf.
- You can remove the attachment if required.
- You can add and remove attachments after you have submitted the Liability Claim via the 'Edit' function.

Declaration

There are two declarations on the claim form.

The first is that you have the authority to make the claim.

The second is that you accept all terms and conditions as stated on the claim form.

Read all of the declarations carefully, and if you agree **tick the boxes** and click on **Submit**.

Declaration

Authority to Act

I am authorised to make this application.

Customer Privacy

Ergon Energy is collecting information on this form for the purposes of assessing and processing a claim for loss or damage. This may include the collection of your personal information. If you do not provide all of the required information we may not be able to assess your claim request. Information will not be disclosed to any other third parties, without your consent, unless authorised or required by law. If you wish to obtain access to your personal information or make a complaint about a breach of your privacy, you may contact the Privacy Officer Ergon Energy on 13 74 66 or privacy@ergon.com.au. Please refer to Ergon Energy's [Privacy Policy](#).

Claimant Declaration

I declare that all of the information given on this application form is complete and correct.

I declare that I am the owner of all the lost or damaged property identified in this claim request.

I acknowledge that I am required to provide Ergon Energy assessors with reasonable access to investigate my claim request.

I acknowledge that any goods (excluding food) included in my claim request must not be disposed of without the prior consent of Ergon Energy.

I have read and accept all terms and conditions.

Save

Submission

Once you click on **Submit**, you will receive a Claim Number.

Liability Claim Confirmation

Thank you for submitting Liability Claim Application.

Your application has been submitted for the Claimant:
Ergon Energy will contact you after it is reviewed.

The Application Reference Number is: **LC19**