### **Climate Safe Rooms** Expression of Interest



### Section 1: About you

Please complete this form to express your interest in participating in Yarra Council's **Climate Safe Rooms** pilot program.

Program participants will receive up to \$10,000 in free energy upgrades to upgrade a room in their home so it stays a comfortable temperature on hot and cold days.

To be eligible for this program, you must meet the eligibility criteria listed below. You must be a holder of an eligible concession or health care card living in the City of Yarra, and receive support services for a health condition that puts you at risk from extreme heat or cold, as confirmed by a health professional.

This paper form is designed for residents to complete. If you are a rental provider or community housing provider applying on behalf of an eligible tenant, please use the online form at <a href="http://www.yarracity.vic.gov.au/climate-safe-rooms">www.yarracity.vic.gov.au/climate-safe-rooms</a>.

If you need assistance filling out this form, please call Yarra Council on 03 9205 5555. For interpreter services, call 03 9280 1940.

#### 1) Which of the following best describes you?

- □ Renter
- $\hfill\square$  Community housing resident

2) If you live in community housing - Name of your community housing organisation

3) Your contact details		
First name	Last name	
Phone number		
Email		
Street address		
Suburb		_Postcode

4) Would you need interpreter assistance to participate in this program?

- □ Yes
- 🗆 No

#### 5) If yes, what language?

- 🗆 Arabic
- $\Box$  Cantonese
- $\Box$  Greek
- 🗆 Italian
- Mandarin
- □ Vietnamese
- Other Write In: \_\_\_\_\_\_

#### 6) Do you or someone living in your home have one of the following eligible concession cards?

- Centrelink Pensioner Concession Card
- Veterans' Affairs Pensioner Concession Card
- Centrelink Health Care Card
- Veterans' Affairs Gold Card for All Conditions
- Veterans' Affairs Gold Card War Widow/er or TPI
- Veterans' Affairs Gold Card POW & EDA

Centrelink	Veterans'	Centrelink	Veterans'		Veterans' Affairs
Pensioner	Affairs Pensioner	Health Care	Affairs Gold Card		Gold Card
Concession Card	Concession Card	Card*	For All Conditions		POW & EDA
*****	All and a second	An and an and a second	Veteran	Veteran	Veteran

#### You will need to provide evidence of your eligible concession card to participate in the program.

🗆 Yes

🗆 No

#### 7) How would you like to provide evidence of your eligible concession card?

 $\Box$  Provide it now – attach a copy to this form

 $\Box$  Provide it later

Please send a photo of your eligible concession card to:

- By email info@yarracity.vic.gov.au
- By mail Attn: Sustainability team Yarra City Council PO Box 168 Richmond VIC 3121
- Attach a copy to this form
- In person

Richmond: Richmond Town Hall customer service, 333 Bridge Road Abbotsford: Collingwood Town Hall, 140 Hoddle Street We will make a copy to attach to this form.

If you need help, please call 03 9205 5555. For interpreter services, please call 03 9280 1940.

# To be eligible for the Climate Safe Rooms pilot program, you or someone in your home must receive support services for a health condition that puts them at risk from extreme heat or cold.

You need to provide confirmation from a medical or health professional that you meet the health condition eligibility criteria.

You do not need to disclose your health condition to us.

#### Examples of eligible health conditions include:

- severe persistent asthma
- cardiovascular disease
- cerebral palsy
- chronic obstructive pulmonary disease (COPD)
- diabetes
- fibromyalgia
- motor neuron disease (MND)
- kidney disease
- lupus
- lymphedema
- multiple sclerosis (MS)
- Parkinson's disease
- polio / post-polio syndrome
- quadriplegia / paraplegia
- severe respiratory disease
- rheumatoid arthritis or other severe musculoskeletal condition
- scleroderma
- or another medical or mental health condition that puts you at risk from extreme heat or cold, as confirmed a medical professional or community health professional.

## 8) Do you or someone in your home receive support services for a health condition that puts you at risk from extreme heat or cold?

If not, you are not eligible for the Climate Safe Rooms pilot program. You may be eligible for the Yarra Home Energy Upgrades pilot program, to receive a \$3,000 subsidy for energy upgrades to make your home more comfortable in hot and cold weather.

You can request a paper copy of the Yarra Home Energy Upgrades expression of interest form, use the QR code here, or visit <u>www.yarracity.vic.gov.au/energy-upgrades</u>.

□ Yes

 $\Box$  No



# You will need to provide evidence that you meet the health condition eligibility criteria, confirmed by a medical or health professional.

- 1. Complete the health condition eligibility confirmation letter template attached to this form.
- 2. Ask your medical or community health professional to sign this letter to confirm you meet the health condition eligibility criteria.
- 3. Return the completed form (instructions below).

#### Health professionals able to confirm eligibility include:

• General Practitioners or Community Health Professionals with knowledge of your health condition.

#### Community Health Professionals include:

- community nurses
- case managers
- allied health staff
- social workers
- service facilitators.

#### 9) How would you like to provide your letter of health eligibility?

□ Provide it now – please attach to this form.

□ Provide it later (instructions below).

Please send your health condition eligibility confirmation letter to:

- By email info@yarracity.vic.gov.au
- By mail Attn: Sustainability team Yarra City Council PO Box 168 Richmond VIC 3121
- Attach to this form
- In person Richmond: Richmond Town Hall customer service, 333 Bridge Road Abbotsford: Collingwood Town Hall, 140 Hoddle Street

If you need help, please call 03 9205 5555. For interpreter services, please call 03 9280 1940.

### Section 2: About your home

These questions ask about your home. If you don't know, simply leave it blank.

You will receive a home energy assessment as part of this program which will provide more information.

#### 10) Which of the following best describes your home?

- □ Freestanding house
- $\hfill\square$  Semi-detached or row house
- □ Townhouse
- □ Unit , flat or apartment (3 storeys or less)
- □ Unit , flat or apartment (4-8 storeys)
- □ Unit , flat or apartment (9 storeys or more)
- Other Write In: \_\_\_\_\_\_

If you are renting or living in community housing, we will need your landlord or community housing provider's permission to install upgrades.

You do not need your landlord's permission to receive the home energy assessment.

We can help you with a letter template you can send your landlord.

We may be able to talk to your community housing provider or landlord to tell them about the program.

#### 11) Have you already talked to your landlord or community housing provider about this program?

(This is not required to submit your expression of interest.)

- $\Box$  Yes, and they are supportive
- □ Yes, but their support is uncertain
- 🗆 No

# 12) Does your home have at least one room that stays a comfortable temperature on hot and cold days, and is affordable to heat and cool?

- □ Yes
- 🗆 No

#### 13) Do you know if your home already has any of the following?

	Yes	No	Don't know
Solar			
Reverse cycle air conditioning			
Heat pump hot water system			
Ceiling insulation			
Well sealed doors and windows			
Wall insulation			
Under floor insulation			

14) Is there anything else you'd like to tell us about the energy efficiency of your home? (optional)

## Section 3: Other factors we may consider (optional)

If there is a waitlist, we may give priority to people who have additional risk factors.

Because this is a pilot program, we may also give priority to including people in a range of different circumstances.

By answering these questions, you are helping us to know more about your situation.

#### 15) Your age range (optional)

- □ 18-24
- □ 25-34
- □ 35-49
- 50-64
- □ 65+
- $\Box$  Prefer not to say

#### 16) Do you identify with any of the following? (optional)

- □ Aboriginal
- □ Torres Strait Islander
- □ Person with a disability

 $\hfill\square$  Person with limited mobility (e.g. use a wheelchair / need assistance moving around / confined to bed)

- □ Carer
- □ Speak a language other than English at home
- $\hfill\square$  None of these
- □ Prefer not to say

#### 17) Who lives with you in your home? (optional)

- □ Other people (adults and children)
- □ Another adult(s), no children
- □ A child/children (I am the only adult)
- □ I live alone
- □ Prefer not to say

#### 18) Are any children living at your home under the age of 5? (optional)

🗆 Yes

- 🗆 No
- □ Prefer not to say

### Section 4: Permission to contact you

In this section we ask for permission to contact you and use your information for this program.

Your personal information will be managed in accordance with our privacy policy and will not be disclosed to any other third party without your consent, unless required or authorised by law. You can contact Yarra Council for access to and/or amendment of the information recorded.

#### 19) How did you hear about this program?

🗆 Council	newsletter
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- □ Social media
- □ Council website
- Event
- $\Box$  Another organisation
- □ Flyer or poster
- $\hfill\square$  Word of mouth
- Other Write In \_\_\_\_\_\_

## 20) Please tick to accept the terms and conditions below to enable our project partner to contact you about the program.

- □ I consent to the information in this form being provided to Yarra City Council's Climate Safe Rooms project partner, a trusted organisation appointed by Yarra Council, for the purposes of the Climate Safe Rooms pilot program. **(REQUIRED)**
- □ I consent to the information I provide to the Climate Safe Rooms project partner being shared with Yarra Council, and information I provide to Yarra Council being shared with the project partner, for the purposes of the Climate Safe Rooms pilot program. **(REQUIRED)**
- □ I agree to be contacted for the purposes of the Climate Safe Rooms pilot program. (REQUIRED)
- □ I agree to complete two surveys, before and after my Climate Safe Room is upgraded. (REQUIRED)
- □ I agree to be contacted by Yarra Council periodically in the 1-2 years after the pilot program, to help Council learn from this program **(OPTIONAL)**

## 21) Would you like to receive Yarra Council's monthly sustainability e-newsletter, Yarra Environment News? (optional)

If you answer yes, please ensure you have provided your email address in this form.

□ Yes

🗆 No

#### Please return your completed form to:

- By email info@yarracity.vic.gov.au
- By mail Attn: Sustainability team Yarra City Council PO Box 168 Richmond VIC 3121
- In person

Richmond: Richmond Town Hall customer service, 333 Bridge Road Abbotsford: Collingwood Town Hall, 140 Hoddle Street If you need help, please call 03 9205 5555.

For interpreter services, please call 03 9280 1940.

### Thank You!

Thank you for expressing your interest in Yarra Council's Climate Safe Rooms pilot program.

Expressions of interest are open now for energy upgrades starting in January 2025.

#### Our project partner will contact you in January.

There are a limited number of places in this pilot program.

If places are full, you will be notified that you have been placed on the waitlist, and contacted if a place becomes available.

You can also get in touch with us at climateemergency@yarracity.vic.gov.au or on 03 9205 5555.

For interpreter assistance, call 03 9280 1940.

More information about the Climate Safe Rooms pilot program:

www.yarracity.vic.gov.au/climate-safe-rooms

### Yarra City Council Climate Safe Rooms Pilot Program Template Letter Confirming Eligible Health Condition

Please give this information to your medical or community health professional and ask them to complete the template letter on the next page.

### Information for medical and health professionals

Yarra's Climate Safe Rooms pilot program will provide free energy upgrades worth up to \$10,000 to eligible residents, to upgrade a room in their home so it stays a comfortable temperature on hot and cold days.

Eligible residents include concession card and health care card holders in Yarra who currently receive support services for an existing chronic health condition that puts them at risk from extreme heat or cold.

Participants will receive energy upgrades to improve one room in their home with tailored upgrades such as insulation, draught proofing to seal gaps and cracks, reverse cycle heating and cooling, a small solar system to offset the costs of heating and cooling, and more.

#### Examples of eligible health conditions include:

- severe persistent asthma
- cardiovascular disease
- cerebral palsy
- chronic obstructive pulmonary disease (COPD)
- diabetes
- fibromyalgia
- motor neuron disease (MND)
- kidney disease

- lymphedema
- multiple sclerosis (MS)
- Parkinson's disease
- polio / post-polio syndrome
- quadriplegia / paraplegia
- severe respiratory disease
- rheumatoid arthritis or other severe musculoskeletal condition
- scleroderma

- Iupus
- or other medical or mental health condition that puts you at risk from extreme heat or cold, as confirmed a medical professional or community health professional.

Applicants do not need to disclose to the project team what their eligible health condition is.

#### Health professionals able to confirm eligibility include:

• General Practitioners or Community Health Professionals with knowledge of the applicant's health condition.

#### Community Health Professionals include:

- community nurses
- case managers
- allied health staff
- social workers
- service facilitators.

Please complete the attached template letter to certify that the applicant meets the health eligibility criteria for the Climate Safe Rooms pilot program.

### Yarra City Council Climate Safe Rooms Pilot Program Letter confirming eligible health condition

Date	

Attn: Yarra Council Climate Safe Rooms pilot program

This is to certify that	meets the health condition
(applicant nan	ne)
eligibility criteria for the Yarra Climate Safe Re	ooms pilot program, and is currently receiving support
services for an existing chronic health condition	on that puts them at risk from extreme heat or cold.
I am a medical professional or community he	alth professional with knowledge of the applicant's
health condition.	
Signed	
Name	
Organisation	
Email	

Phone \_\_\_\_\_