## Climate Action - Stream B: Energy Support Grant

### Purpose

Deliver carbon emissions reduction partnerships to achieve the Climate Emergency Plan net zero emissions by 2040.

### **Energy Support Grant**

Support for eligible residents upgrading to:

- Reverse Cycle Air Conditioner (RCAC)
- Must be replacing a gas or wood burning heater or RCAC older than 15 years.

Insulation and other thermal shell upgrades including:

- Insulation
- Draught stoppers (for doors and windows, chimneys)
- Weather seals for external and garage doors
- Window coverings (e.g. block out roller blinds, honeycomb blinds, thermal blinds, pelmets)
- Reflective window film

The products installed through the grant must be installed by appropriately licensed and accredited installers, who are able to offer discounts under the Victorian Energy Upgrades Scheme for Reverse Cycle Airconditioning and draft proofing. Insulation Installers must be certified under the Energy Efficiency Council. Products installed need to be maintained in accordance with any relevant guidelines and in a manner which does not pose risks to the health or welfare of any person

Funding will be applied to the out-of-pocket cost of goods, installation or service incurred by the owner, occupier, after all other incentives, grants, rebates and discounts received have been deducted.

### Important Information

Before completing this application, applicants are required to read the <u>Grant Program Guidelines</u>

#### **Funding**

• Eligible applicants may seek up to 50% of the related costs or \$1,000, whichever is the lesser

#### **Closing Date**

4 June 2025 unless funds are exhausted earlier

#### **Eligibility**

Property must be located in the Mornington Peninsula Shire Local Government Area

- Only one application per property address (however this may include multiple products)
- Must be an owner-occupier, landlord with eligible tenant/s and/or a property manager on behalf of a landlord with eligible tenant/s
- Installers of Reverse Cycle Air Conditioners and draught proofing must be able to offer reductions through the Victorian Energy Upgrades Program
- Eligible applicants must provide evidence that they, or their tenant, holds at least one of the following Centrelink payment types:
  - Department of Veteran Affairs Gold Card
  - Health Care Card
  - Low Income Health Care Card
  - Pensioner Concession Card
  - Commonwealth Seniors Health Card
  - Or receive payments through: Carer Allowance, Family Tax Benefit.

### Applicant and Project Details

Who is completing this application? \*

\* indicates a required field

Form Completion

<ul> <li>I am the owner of the property</li> <li>I am the landlord of a rental property</li> <li>I am the property managing agent</li> </ul>		
<b>Property Address (where work</b> Address	ks to be undertaken) *	
Address Line 1, Suburb/Town, and Pos	stcode are required.	
Have you discussed your proje	ect with a Shire Officer? If so, who? *	
Property Manager		
<b>Property Agent Organisation N</b> Organisation Name	Name *	
Contact Name *		

Property Agent Addi Address	ress *		
Property Manager E	mail *		
Must be an email address	5.		
Applicant * First Name	Last Name		
Applicant Postal Add Address	iress		
Applicant Primary Pl	hone Numb	oer *	
Applicant Primary E	mail *		
<b>Do you live full-time</b> O Yes	at the nor	minated p	roperty *  O No
<b>Upload - evidence of</b> Attach a file:	f residence	e (rates no	tice, utility bill) *
<b>Does the property h</b> ○ Yes	ave a full-t	time tenar	n <b>t? *</b> ○ No
<b>Upload - evidence of</b> Attach a file:	Tenant Ag	greement	*

You have indicated the property is not inhabited on a full time basis. This is an eligibility requirement for funding therefore please do not continue with this application.

For more information, please contact Nicci Tsernjavski, Climate Change Partnerships Officer to discuss.

Ph. 5950 1297

Nicci.tsernjavski@mornpen.vic.gov.au

Eligible applicants must provide evidence of at least one of the following Centrelink payment types:

- Department of Veteran Affairs Gold Card
- Health Care Card
- Low Income Health Care Card
- Pensioner Concession Card
- Commonwealth Seniors Health Card
- Carer Allowance
- Family Tax Benefit payments

Upload - evidence Health Care Card, Pe	nsioner Concession card or equivalent *
Attach a file:	

#### Assessment Criteria

The following criteria will be assessed on a scale of 1-5 with

- 5 = meeting each criterion at a high level and
- 1 = not meeting the criterion

Applicants project must meet a minimum score of 55%

### 1) CRITERION: Energy Support Grant Priorities

# Council and Wellbeing Plan Theme 1: A healthy, natural environment and well-planned townships

Wh	nich product/s are you upgrading/installing? '
	Upgrading to reverse cycle air conditioning
	Insulation
	Draught stoppers (windows, doors, chimneys)
	Weather seals
	Window coverings
	Reflective window film

2) CRITERION: Feasibility

Briefly describe the works you intend to undertake. \*

What year was the pr	operty built? (approxin	nately)	
Photographs showing Attach a file:	existing conditions/ap	opliances *	
Please include relevant pho undertaken.	otographs of the property, sh	howing areas where the work will be	!
Contractor Details			
accordance with any the health or welfare	relevant guidelines, and e of any person.	qualified installers, and maintaine in a manner which does not pos by the <u>Energy Efficiency Council</u>	
Contractor Name * Organisation Name			
Contractor ABN			
The ABN provided will be check that you have ent		owing information. Click Lookup a	above to
Information from the Austr	alian Business Register		
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (GS	Γ)		
DGR Endorsed			
ATO Charity Type	More information		

Must be an ABN.

ACNC Registration
Tax Concessions

Main business location

### **Contractor Primary Phone Number \***

Must be an Australian phone number.

Contractor Primary Email *				
Must be an email address.				
If you are installing a Reverse Cycle Air ( sealing), is an installer that can offer dis Victorian Energy Upgrades Scheme? *	Conditioner or draught proofing (weather counts under the			
○ Yes	$\circ$ No			
You can check <u>here</u>				
If you are installing insulation, is the ins Council? *	taller certified by the Energy Efficiency			
∩ Yes	○ No			
You can check <u>here</u>				
3) CRITERION: Proposed Budget				
k indicates a required field				

Budget - Project Income (Co-contribution)

Please show all sources of cash income **(excluding this grant**) in the table below that contributes to the project. For instance, any reductions under the Victorian Energy Upgrades Program

- Applicant co-contribution 50% or \$1,000 (whichever is the lesser) of the total amount after the Victorian Energy Upgrade reduction
- **Do not** include the amount sought from the Shire (see separate question below)
- **Do not** use commas or \$ signs in figures. You may add additional rows if needed.
- Funding will be applied to the out-of-pocket cost of goods, installation or service incurred by the owner, occupier, after all other incentives, grants, rebates, and discounts received have been deducted.
- Nominate 'other' for alternate source.

Total income and expenditure should be the same. All amounts should be GST exclusive.

Co-contribution Source	Co-contribution Amount \$	
	\$	
_	\$	

### Budget - Project Expenditure

Please describe the products to be purchased through this grant so that it is clearly understood what the income will be used for.

- Nominate a funding source for each item.
- Refer to the guidelines to see what is ineligible to be funded by the grant.

- Grants will be applied to the out-of-pocket goods, installation or service cost incurred by the owner, occupier, after all other incentives, grants, rebates, and discounts received have been deducted.
- **Do not** use commas or \$ signs in figures. You may add additional rows if needed.

Product Description	Product Price	Funding source (optional)
The Victoria Energy Upgrade Scheme is State Government	Total price after Victorian Energy Upgrade reduction	
Discount - use the pull down list to tick that box		
	\$	
	\$	
	\$	

#### **Income Totals**

Funding cannot be
more than 50% of the
relevant cost or \$1,000,
whichever is the lesser.
Grant funding requested *

\$

Maximum is \$1,000

(	Со	-co	nt	rib	uti	or

This number/amount is calculated.

#### Total Income Amount

\$

This number/amount is calculated.
This figure is the total of grant funding request and cocontribution.

### Expense Totals & Quotes

Total Expenditure Amount
\$
This number/amount is calculated.

Upload - quote or quotes, estimated cost or evidence for costs from a registered organisation or business \*
Attach a file:

Installer quotes should contain business name and ABN

### **Outcomes and Metrics**

#### Outcomes

Please tell us about the outcomes you expect to result from your project. Generally, outcomes can be framed as an increase or decrease in one or more of the options we have below:

#### Alignment with our outcomes

How does your intended outcome link to our outcomes?

Which of our outcomes will your project contribute	Please explain how your intended outcome helps
to? If multiple apply pick the most relevant. Plese	contribute to ours.
use drop down boxes to select you choice.	
No more than 1 choice may be selected.	

#### Our metrics

A metric is a measurement designed to indicate whether or not progress towards an outcome is anticipated to happen and/or has occurred at the end of your project. An 'Activity Metric' tells us how much of something you're doing or producing. See below some metrics you may use for your project.

Metric - Please use drop down boxes and pick the response most applicable to your upgrade.	Target	Progress	Collection method
Which of our metrics (if any) will you track? You may be required to report on your progress. Add more rows if you want to list additional metrics.  No more than 1 choice may be selected.	E.g. 1 for 1 Reverse Cycle Air Conditioner installed, 50 for 50 square metres of insulation installed, 4 for 4 draught proofing measures installed Must be a number.	Please place 0 as the value to indicate no installations have been undertaken using this grant Must be a number.	Confirm you will supply the information required to verify the installation

# Agreement and Certification

\* indicates a required field

Certification and Inspection Consent

I certify that to the best of my knowledge, the information and attachments to this application is true and correct. \*

O I agree and declare the above to be true and correct

I understand that if this application is successful, I will be required to sign a MPS Funding Agreement prior to funds being released \*

O Yes

I acknowledge and agree that Mornington Peninsula Shire accepts no liability in respect of any claim, cause of actions, loss or damage arising out of, or in relation to, any device purchased, or service procured under the incentives.

O Yes

I agree to allow inspection of the install necessary) *	ation by Shire officers (if deemed		
○ Yes	○ No		
If this application is successful, are you willing to feature in Council's promotion to our Grant Program? * *			
○ Yes	○ No		