



warm babies

community energy action

Self referral form

Eligibility criteria:

- You **MUST** have a valid Community Services Card to qualify for this programme.
- Have a baby 0-12 months OR a child 1-4 years with a health condition living in the house.
- Housing NZ or City Council tenants are **NOT** eligible for this programme. Contact Housing NZ or the City Council directly if you have any concerns about heating and insulation.

Name: Phone (day):

Address: Cell phone:

Suburb and town:..... Email:

Community Services Card nr. (nr. in middle of card): Expires:

Number of adults (18 yrs and over)	Number of children under 12 months	Number of children 1-4 yrs	Number of children 5-17 yrs

Age of the youngest child:.....

Ethnicity of children (tick all that apply):

<input type="checkbox"/> NZ European	<input type="checkbox"/> Asian
<input type="checkbox"/> Maori	<input type="checkbox"/> Other
<input type="checkbox"/> Pacific Islander	

Are there any children 0-4 years with a health condition? yes no

Health condition	Name of child	Age of child	Severity of health condition
			Mild/moderate/severe
			Mild/moderate/severe
			Mild/moderate/severe

Have any of these children been hospitalised for that health condition in the last 12 months?

yes, times no

Are you:

- a homeowner
- renting from a private landlord/boarding

What is your weekly rent/board? \$.....

How many bedrooms does the home have?

Does the landlord have a Community Services Card? yes no

If yes, what is the Community Services Card number:

Name landlord:

Postal address landlord:

Phone number landlord: Cell phone number landlord:

How long have you lived in the house?

How long do you intend to stay in the house? less than a year more than a year

Approximate age of the house?

Does the house have any problems with (tick all that apply):

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> cold | <input type="checkbox"/> mould |
| <input type="checkbox"/> draughts | <input type="checkbox"/> dampness/condensation |

What heating is being used in the main living area (tick all that apply)?

- | | |
|--|--|
| <input type="checkbox"/> heatpump | <input type="checkbox"/> oil column heater/ fan heater/ bar heater |
| <input type="checkbox"/> woodburner/ coal burner | <input type="checkbox"/> nightstore heater |
| <input type="checkbox"/> pellet fire | <input type="checkbox"/> unflued gas heater |
| <input type="checkbox"/> flued gas heater | <input type="checkbox"/> other: |

How did you hear about the Warm Babies Programme?

Signature: Date:

Community Energy Action cannot guarantee that any insulation or heating measures can be installed until after the house has been assessed. Acceptance into the project is entirely at the discretion of CEA. All information supplied is confidential.

Post to: Community Energy Action Charitable Trust, PO Box 13759, Christchurch 8141