

State Revenue Office FACT SHEET - April 2019

Tasmanian Government Electricity Concessions Life Support, and Medical Cooling or Heating

Background

Within Tasmania, the State Government offers the following electricity concession schemes for certain medical conditions:

- The Life Support Concession; and
- The Medical Cooling or Heating Concession.

About the concessions

Both concessions provide a daily discount to eligible domestic electricity customers who use, or live with someone who:

- uses a life support system; or
- requires cooling or heating to manage a medical condition.

Important: Applicants for either scheme must apply annually, and a medical practitioner must certify the application.

ALREADY RECEIVING THE CONCESSION?

I am already receiving the Life Support or the Medical Cooling or Heating Concession. Do I have to do anything now?

No, there is nothing to do at this time. Before the annual expiry of your concession, the electricity retailer will send you a new form to apply for a renewal.

NEW APPLICANTS - FORMS

I am a new applicant, and wish to apply for one of the concessions

Forms for the Life Support, and Medical Cooling or Heating concessions, including the eligibility conditions, are available from:

- the applicant's electricity retailer; or
- Service Tasmania; or
- www.concessions.tas.gov.au; or
- by using [this link](#) (or visiting Concessions at www.sro.tas.gov.au).

Is there an electricity concession for non-medical conditions?

Yes. Access the Annual Electricity Concession eligibility criteria and application form at www.concessions.tas.gov.au.

More information

Website: www.concessions.tas.gov.au

Phone: 1300 135 513 (Service Tasmania)

Visit: Service Tasmania

State Revenue Office
Department of Treasury and Finance

Tasmanian Government

Life Support Concession

The Life Support Concession provides a daily discount to eligible customers who use an approved life support system or who live with someone who uses such a system.

Electricity account holder's details

First Names _____ Surname _____
Residential Address _____
Suburb/Town _____ Postcode _____
Postal Address (if different from above) _____
Suburb/Town _____ Postcode _____
Home Phone No. _____ Mobile Phone No. _____
Signature _____ Date ____/____/____

Electricity retailer's details

Electricity Retailer _____
Account No. _____ National Meter Identifier (NMI) No. (if known) _____

Patient's details

First Names _____ Surname _____
Residential Address _____
Suburb/Town _____ Postcode _____

Medical Practitioner to complete this section

The applicant has the following type(s) of machine (please ✓)

<input type="checkbox"/> Oxygen concentrator	<input type="checkbox"/> Haemo-dialysis machine
<input type="checkbox"/> Chronic positive pressure and airways regulator	<input type="checkbox"/> Respirator (iron lung)
<input type="checkbox"/> Combination oxygen concentrator chronic positive pressure and airways regulator	<input type="checkbox"/> Phototherapy machine
<input type="checkbox"/> Peritoneal dialysis machine	<input type="checkbox"/> Left ventricular assist device
<input type="checkbox"/> Continuous positive airways pressure machine	

If your patient's machine does not appear on the list above, please add it here.

Other: _____

Practitioner's name _____ Position _____
Telephone _____ AHMRA No. _____
Signature _____ Date ____/____/____

Illustration only.

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Medical Cooling or Heating Concession Application Form

Medical Cooling or Heating Concession

Electricity account holder's details

First Names _____ Surname _____
Residential Address _____
Suburb/Town _____ Postcode _____
Postal Address (if different from above) _____
Suburb/Town _____ Postcode _____
Home Phone No. _____ Mobile Phone No. _____

Electricity retailer's details

Electricity Retailer _____
Account No. _____ National Meter Identifier (NMI) No. (if known) _____

Patient's details

First Names _____ Surname _____
Residential Address _____
Suburb/Town _____ Postcode _____

Account holder's concession card type (please ✓)

Pensioner Concession Card (Centrelink or Veterans' Affairs) Health Care Card (Centrelink)

Account holder's concession card number

Centrelink Card Number (CRN) _____
Veterans' Affairs Card (File Number) _____

Please ensure that your medical practitioner completes the certification on the next page.
Failure to complete all necessary sections of the form may delay the processing of your application.

Illustration only.