

APPLICATION FOR HOME WEATHERIZATION

This application is for a home Weatherization grant for low-income households. The Weatherization Assistance Program is funded by the U.S. Department of Energy, U.S. Department of Health & Human Services, Rocky Mountain Power and Questar Gas. You must provide the total gross income for the period specified for all members of the household, which will be used to determine your eligibility for the program. Providing false information, to obtain assistance, will result in this Weatherization application being denied. You should also receive a Privacy Act statement with this application for Weatherization services.

ALL PORTIONS OF THIS APPLICATION MUST BE COMPLETED

Applicant's Name: _____ Soc. Sec. #: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone #: _____

Date of Birth _____ Age _____ E-Mail address: _____ (if you have one)

The Home to be weatherized is:

Owner Occupied: _____ Title is recorded in the name of: _____

Rented or Leased: _____ Landlord Name & Address: _____

A signed Landlord Agreement must be included if the application is for a rented or leased dwelling.

Date of construction (if known): _____ Is the home a mobile/manufactured home? Yes _____ No _____

This dwelling is scheduled for or has in progress other housing rehabilitation besides Weatherization. Yes _____ No _____

Does this household contain members that are Native Americans? Yes _____ No _____ (for federal reporting only)

Home is Located on Tribal Lands (Dwellings located on tribal lands do not require proof of Ownership):

Total number of people living at the above residence: _____ List each below:

<u>Name</u>	<u>Date of Birth</u>	<u>Age</u>	<u>Sex</u>	<u>Soc. Sec. # 18 & Older</u>	<u>Income***</u>	<u>Source</u>	<u>Disabled ?</u>
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

List additional household members on the back of the application.

***Income for the month before application. Income from all sources must be calculated before taxes and deductions. Proof of income must be included with application in order to be considered for Weatherization services.

I hereby give permission to the administering local agency, State of Utah, U.S. Department of Energy, Rocky Mountain Power, and Questar Gas to inspect the real property I occupy in order to determine weatherization needs, complete the weatherization work, and after weatherization, to verify the work and its effectiveness in meeting program goals.

My signature below certifies the information above is correct to the best of my knowledge. In addition it authorizes the release of income and utility usage records to the administering agency and the State of Utah. I authorize employers, government agencies, (Soc. Sec. Admin, Veterans Admin, Welfare Programs, etc.) to provide information concerning the income statement above. Where applicable I grant permission for Rocky Mountain Power to pay the State of Utah for the installation of approved measures and administrative services in the dwelling I occupy, described above. I acknowledge that I have received a copy of the Privacy Act.

Applicant's Signature: _____

Date: _____

Use this space for additional information

Do Not Write Below This Line-For Office Use Only

Income Verification provided:	Type	Date	Amount
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
	_____	_____	\$ _____
Total Household income from all sources			\$ _____

Percent of poverty based on current guidelines _____

I certify I have reviewed the attached documentation.
Based on current guidelines, this client is eligible for
Weatherization services.

_____ Signature/Eligibility date