

Instructions to Complete Your Application for the Weatherization Assistance Program

- Page 1:**
- Applicant and Utility Information:** Fill out all of the information requested.
 - Qualification:**
 - o Option 1: Place a check next to each type of assistance you currently receive, if applicable.
 - o Option 2: If you do not currently receive one of the forms of assistance listed, put a check next to all the sources of household income.
 - Household Info:** Include everyone living in your household. **Three (3) months of income documentation for each person in the household is required.**

- Page 2:**
- Fill in your name and check your type of residency. Be sure to **SIGN** where indicated.

- Page 3:**
- Description of Home:** To the best of your knowledge, please fill out all the information requested.
 - Home Access Authorization:** This gives us your permission to inspect all areas of your home and take photos for the purposes of delivering weatherization services. Be sure to **SIGN** where indicated.

- Page 4:**
- If you RENT your home, page 4 must be completed by your landlord.**

- Page 5:**
- Read this page, check the appropriate box and be sure to **SIGN** where indicated.

- Page 6:**
- This page has important information and a release of liability as a participant of WAP. Read and **SIGN** where indicated.

REQUIRED DOCUMENTS to be included in addition to your application. Your application is not complete without these documents.

- Copy of current government-issued I.D.
 - Copy of recent heating bill (natural gas, propane, etc.) and electric bill that include account and premise numbers. If submitting an Xcel bill, please be sure to include page 2 as this is the only place your premise number appears.
 - Application may have included consent forms for Xcel Energy, Atmos Energy, Black Hills Energy or other utility providers.
 - If automatically qualifying, include a copy of your public assistance award or approval letter. This letter must be current. Eligible pre-qualifying assistance programs include: **LEAP, SNAP, TANF, AND, SSI**
- OR**
- If qualifying by income documentation, include income documentation for each working household member for the **past three months**. Documentation required for all sources of income, including: paystubs, Social Security income (award letter), pension, annuities, VA benefits, disability income, unemployment income, rental property income, etc. **Self-employed applicants, please contact ERC for an income affidavit that must be notarized.**

GROSS INCOME LIMITS

Household Size	Monthly Income max.	Yearly Income max.		Household Size	Monthly Income max.	Yearly Income max.
1	\$2,759	\$33,108		5	\$6,115	\$73,860
2	\$3,608	\$43,296		6	\$7,003	\$84,036
3	\$4,457	\$53,484		7	\$7,163	\$85,956
4	\$5,306	\$63,672		8	\$7,444	\$89,328

ERC's Colorado Springs location serves residents of Cheyenne, Douglas, El Paso, Elbert, Fremont, Kit Carson, Lincoln, and Teller counties.
Energy Resource Center is open Mon-Fri, 7:30 am-4:00 pm.
Please return your completed application as soon as possible so that you can be prioritized for service.

Please submit your application and required documents to:

**Energy Resource Center
540 E. Cimarron Street, Colorado Springs, CO 80903
OR email it to carmenm@erc-co.org
For more information or help filling out your application, call (719) 591-0772**



Weatherization Assistance Program Application

Please note that, per Public Law 116-260, if your home has received Weatherization Assistance Program services within the past 15 years and 1 month you are ineligible for weatherization services.

Applicant Information (Please Print)

Last Name:	First Name:	Middle Initial:
Street Address: (location of home)		Unit # or Manufactured Lot #
City:	County:	Zip:
Primary Phone:	Secondary Phone:	Other Phone:
E-Mail:		
Mailing Address - If different from street address	City:	Zip:

Utility Information

Natural Gas or Propane Provider: _____	Account #: _____
Electric Provider: _____	Account #: _____

Qualification Information

Option 1: Qualify through Public Assistance:
If you, or any member of your household, currently receives any of the following forms of public assistance, you may pre-qualify and verification of income is not necessary. However, you still must submit a valid approval letter with this application. Check all that apply:

TANF AND SSI SNAP LEAP

OR

Option 2: Qualify through Household Income Verification:
List all household income below and submit pay stubs or other verification for each income source for the past 3 months. Income documentation must be included for each household member with an income. Income is defined as money received from the following sources (check all that apply):

Job income Social Security Retirement Disability Spousal Support (alimony)
 Workers' Compensation Unemployment Self-employment Other _____

Household Information (please list all people living in your household, including yourself; attach additional sheet if necessary)

Name	Age	Has a Disability?	Native American?	Gross Monthly Income*	Income Source(s)*

*Gross Monthly Income and Income Source columns are only required if the applicant is qualified for Weatherization via Option 2: Household Income Verification, as stated above.



Lawful Presence Affidavit

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that: (check one)

___ I am a United States citizen, or

___ I am a Permanent Resident of the United States, or

___ I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Applicant Signature _____ **Date** _____

Applicants must send a copy of current picture identification with application. Acceptable forms of identification include:

- A valid Colorado driver's license or a valid Colorado identification card
- A valid United States military card/Common Access Card
- A valid United States Coast Guard Merchant Mariner card
- A Native American tribal document
- A valid United States passport
- If you do not possess any of the above documents, your local Weatherization agency can provide you with a list of additional documents which are accepted for verifying lawful presence.



Description of Home

Do you own or rent your home? Own Rent*

*If you rent your home, your landlord must complete the permission form on page 4.

Type of home:

House (select one type): Ranch style (one level) Bi-Level Tri-level House divided into 2 units Duplex
Manufactured Home (select one type): Singlewide Doublewide
Other (select one type): Townhouse Apartment Condo Multiplex Cabin Modular

Home features: Finished basement Unfinished basement Crawlspace Pitched roof Flat roof
 Has an Addition In a Manufactured Home Park

What year was the home built? _____ How long have you lived in the home? _____

Heating System: (check all that apply)

Type: Forced Air Boiler Electric Baseboard Fireplace/Stove
 Wall Furnace Space Heater Floor/Gravity No furnace Other: _____
Fuel: Natural Gas Propane Electricity Wood Other: _____
Location: Basement Attic Crawlspace Wall Floor Other: _____

Cooling System: (check all that apply) Central Air Window A/C Swamp Cooler None

Exterior: (check all that apply) Brick Wood Stucco Vinyl Aluminum Other: _____

Appliances: Hot Water Heater Type: Natural Gas Propane Electric Solar
Cooking Appliance Type: Natural Gas Propane Electric Combination

Additional Home Details:

- Is the home for sale or likely to be put up for sale in the near future? Yes No
• Are you currently remodeling or doing construction on any part of your home? Yes No
If yes, please list: _____
• Does your home have broadband internet? Yes No
• Is anyone in the household on oxygen? Yes No
• Does anyone in the household have allergies or hyper-sensitivities to dust, fiberglass, cellulose, mold, latex, or common building materials? Yes No
If yes, please list: _____

Home Access Authorization

Access to your home: Do you agree to and understand that Colorado weatherization technicians and contractors must be given access to all rooms in your home during business hours and on a reasonable schedule for any work to proceed? Please note that a State Quality Assurance Inspector may also return within one year of work completion to inspect the work, including all safety and diagnostic testing. I agree

Permission to photograph home: Do you agree to allow Colorado weatherization technicians and contractors and its designees to photograph the unit for pre and post-work documentation? Photographs and any identifying information will be kept private. I agree

Before weatherization work can begin, the home must meet a minimum standard of housekeeping. Do you agree to and understand that work areas (specifically areas around heating systems, attic and crawlspace accesses and exterior doors and windows) are to be free of debris, clutter, and pets and be reasonably hygienic where work is to be completed? I agree All of the members of my household have a disability that prevents agreement.*
*Reasonable accommodations may be made for households with disabilities.

Applicant Signature _____ Date _____



To the LANDLORD or PROPERTY MANAGER:

Unit Address: _____ Applicant Name: _____

Your tenant is applying for weatherization services provided by the Colorado Energy Office Weatherization Assistance Program (CEO WAP). If the application is approved, they will be eligible to receive free energy efficiency services that will help them save money on their energy bills and make their unit more comfortable and safe. Weatherization services include an energy audit and safety diagnostics of the home. The energy audit will determine what energy savings measures can be provided to the tenant at no charge. These free measures may include additional attic insulation, wall insulation, crawl space/floor insulation, air sealing, storm windows, ventilation, and furnace or hot water heater repairs. **In multifamily housing (between 2-4 units), if the energy audit reveals the need for heating system replacement or identifies a highly inefficient refrigerator, the program will seek matching funds from you, the landlord.** Because this program is federally-funded and focused on serving low-income households, the typical cost to the landlord for replacement of heating systems or refrigerators is significantly less than 50% of market rate. In these cases you will be presented with all options before moving forward.

Additionally, in order to provide the maximum improvement in comfort, energy savings, and safety, the CEO WAP assesses all areas of the home that could be improved. In some cases, making these improvements to the home can be moderately invasive. For instance, if the walls of the home lack adequate insulation, the weatherization crew may be able to retrofit the walls with insulation, which would require drilling holes through the interior or exterior wall surface. Once insulation is installed, the holes are plugged and patched with spackle or drywall compound as close to the original texture as possible. In some cases the patch may remain somewhat visible. While every effort will be made to blend the patches, extensive drywall repair, wallpapering, or custom texturing cannot be provided. Examples of other measures that may be moderately invasive include ceiling insulation, furnace replacement, and air sealing. Similar to wall insulation, these measures may involve cutting into interior or exterior wall surfaces and may leave behind visual evidence of such.

The goal of the CEO WAP is to provide maximum improvements to comfort, energy savings, and safety. All measures that are deemed cost-effective for your home are strongly encouraged, however, you do have the right to decline certain measures for aesthetic or other reasons. Please be aware that due to the design of the program and federal requirements, if you decline some measures, other measures may no longer be available to you.

If you have concerns about how these measures might impact your property, please indicate below:

- I give my consent and I have no concerns about the CEO WAP serving my property.
- I have concerns about the heating system and/or refrigerator repair or replacement.
- I give my consent, but have concerns about: _____
- I do not give my consent for the CEO WAP to serve my property.

The refrigerator in the property is owned by the: Tenant Landlord

I have read and understand the terms and conditions presented herein, and except for the conditions above, grant permission to perform such weatherization measures as may be suited to this property under the CEO WAP standards. I also certify that the property is not presently for sale, nor is it designated for acquisition or clearance (foreclosure) by a federal, state, or local program. In addition, I agree that rent shall not be raised due solely to the increased value weatherization provides to the dwelling unit. I hereby release and pledge to defend and indemnify CEO WAP, its employees, agents, and independent contractors involved from any liability or loss in connection with the performance of weatherization assistance or any act or eventuality arising from this work.

Landlord Name and Landlord Mailing Address

Landlord Primary Phone # Landlord Other Phone # Landlord Email Address

Landlord Signature and Date



To the HOMEOWNER / TENANT:

In order to provide the maximum improvement in comfort, energy savings, and safety, the Colorado Energy Office Weatherization Program (CEO WAP) assesses all areas of your home that could be improved. In some cases, making these improvements to your home can be moderately invasive. For instance, if the walls of your home lack adequate insulation, the weatherization crew may be able to retrofit the walls with insulation, which would require drilling holes through the interior or exterior wall surface. Once insulation is installed, the holes are plugged and patched with spackle or drywall compound as close to the original texture as possible. In some cases the patch may remain somewhat visible. While every effort will be made to blend the patches, extensive drywall repair, wallpapering, or custom texturing cannot be provided.

Other comfort, energy-saving, and safety measures that may be moderately invasive include ceiling insulation, furnace replacement, and air sealing. Similar to wall insulation, these measures may involve cutting into interior or exterior wall surfaces and may leave behind visual evidence of such.

The goal of the CEO WAP is to provide maximum improvements to comfort, energy savings, and safety. All measures that are deemed cost-effective for your home are strongly encouraged, however, you do have the right to decline certain measures for aesthetic or other reasons. Please be aware that due to the design of the program and federal requirements, if you decline some measures, other measures may no longer be available to you.

If you have concerns about how these measures might impact your home, please indicate below and discuss these concerns with the energy auditor*:

- I have **no concerns** about the Weatherization Program serving my home.
- I have concerns about wall insulation.
- I have concerns about ceiling or attic insulation.
- I have concerns about: _____

I have read and understand the terms and conditions presented herein, and except for the conditions above, grant permission to perform such weatherization measures as may be suited to this property under the CEO WAP standards. I also certify that the home to be weatherized is not presently for sale, nor is it designated for acquisition or clearance (foreclosure) by a federal, state, or local program. I hereby release and pledge to defend and indemnify CEO WAP, its employees, agents, and independent contractors involved from any liability or loss in connection with the performance of weatherization assistance or any act or eventuality arising from this work.

Applicant Signature _____ **Date** _____

**For Tenants: Permission granted by the Landlord represents the final decision related to weatherization concerns.*

Client complaints regarding the rent being raised solely due to the increased value of weatherization upgrades to the dwelling unit, should be directed to 303-866-2100.



Please Read This Section Carefully:

My signature below authorizes Colorado weatherization staff and crew to enter my home as needed to perform weatherization work. My signature verifies this residence is not currently for sale, nor is it designated for acquisition or clearance (foreclosure) by federal, state, or local programs. Upon completion of work, I give permission for the contractor, sub-contractor staff, local, state, and federal officials to inspect said work. My signature below authorizes the Colorado Energy Office Weatherization Program (CEO WAP) and its designees to inspect heating, fuel usage, and utility billing records for up to five years before and after completion of weatherization work, and authorize pertinent utility and fuel companies to make such records available to them solely for obtaining data for evaluation of subsequent energy conservation effectiveness.

I agree, on behalf and for all who stand in my stead, that CEO, its subgrantees, and weatherization crews will not be held liable for any injury or expense incurred by me while participating in this program. I attest to the best of my knowledge that the information on this form is correct and complete. This service is free of charge but if my home is served due to incomplete or incorrect information that would otherwise make my household ineligible, I accept responsibility for paying for services received. I authorize the release of income and benefits information to CEO WAP to document my eligibility. Pursuant to 5 U.S.C. 552(b)(6), of the Freedom of Information Act, the CEO WAP is required to keep confidential any specifically identifying information related to an individual's eligibility application for weatherization services, or the individual's participation in weatherization services, such as name, address, or income information. The State of Colorado in conjunction with CEO may, however, release information about recipients, in the aggregate, in a manner which does not identify specific individuals.

Appeal Process: Once you have completed the application, you have the right for your application to be processed within 30 days. If your application is not processed within 30 days, or if you are denied services, you may appeal the decision using the following appeals procedure: You may appeal to a Program Manager or the Executive Director of the local weatherization agency. The Program Manager or the Executive Director will issue a decision in a written letter within 15 days of receipt of the notice of appeal. If the Program Manager or Executive Director denies services, and you still are in disagreement, you have 15 days after receiving the written notification by a Program Manager or the Executive Director to appeal to the Colorado Energy Office Weatherization Program (CEO WAP). Appeals to CEO WAP should be in writing and addressed to: Colorado Energy Office Weatherization Program, 1600 Broadway, Suite 1960, Denver, CO 80202. CEO WAP will have 15 days to respond in writing to all appeals and the decision will be considered final. My signature below indicates that I have read, understood, and agree to the conditions of this application.

Applicant Signature _____ **Date** _____

How did you hear about the weatherization program? (check all that apply)

<input type="checkbox"/>	LEAP	<input type="checkbox"/>	Utility Company	<input type="checkbox"/>	Newspaper
<input type="checkbox"/>	Social Services Office	<input type="checkbox"/>	Brochure	<input type="checkbox"/>	Television
<input type="checkbox"/>	Heat Helpline	<input type="checkbox"/>	Friend/ Family Member	<input type="checkbox"/>	Radio
<input type="checkbox"/>	2-1-1	<input type="checkbox"/>	Bus ad/Billboard	<input type="checkbox"/>	Other:

[Do Not Write Below - For Office Use Only]

I certify that this client is eligible under the appropriate funding guidelines.

Unit WAS weatherized in _____ Unit has *NOT* been previously Weatherized

Authorized CEO WAP Agent Date Approved Income Verification SMI Level% HHN or Qualifying Program

Date Eligibility Expires Year Built Compass Verified (initials) Reg. Historic Property? (Y/N)
Job # _____