



Information Booklet

Agency _____

Customer Name: _____

Job#: _____

Address: _____
Street Address City Zip

County: _____

Total Household Income (Past 30 Days): \$ _____

Telephone#: _____

Cell #: _____

HOUSING STATUS:

OWNER RENTER

APPLICANT TYPE:

Elderly Disabled w/Children (17 yrs. old and under) High Energy User High Energy Burden

STRUCTURE TYPE:

Site-Built Wood Vinyl Brick Concrete Asbestos

Manufactured Home Single-wide Double-wide Other (conditioned add-on)

Is the dwelling located in a Historical District? Yes No

Agency Crew

WAP Coordinator: _____

Contractor

Contractor's Name/Company: _____

Contractor Supervisor's Name: _____

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HOMEOWNER AGREEMENT

The undersigned hereby certifies that he/she is the owner, or his/her designated agent with the authority to make repairs and improvements as necessary, of the property _____.

The Agency will determine what weatherization work is necessary to make the property more energy efficient and will perform that work. The Owner/Agent does hereby authorize the Agency to perform those repairs and improvements to the property for the purpose of weatherization.

Owner/Agent hereby release and agree to indemnify and hold harmless Agency, its staff and volunteers, from any liability in conjunction with the performance of the repairs and improvements.

Owner/Agent certifies that to the best of their knowledge, from October 1, 1994 to date, weatherization work has not been performed on this property under the Weatherization Program.

Owner/Agent agree to provide Agency access to the property at reasonable times for the purpose of inspecting work.

Owner/Agent certify that he/she will occupy either by themselves or an eligible tenant for at least one (1) year after the date the weatherization work is completed.

Owner/Agent agree that the quality of the installation of the materials cannot be guaranteed beyond a period of one (1) year.

If the Owner/Agent leases the property, he/she agrees not to raise the rent due to the improvements made by the weatherization work for a period of at least one (1) year from the date the work is completed.

Print Name - Owner/Landlord	Date
Owner/Landlord Signature	Date
Print Name - Agency Representative	Date
Agency Representative Signature	Date

FUEL RELEASE AGREEMENT

The undersigned grants permission to Agency to acquire the fuel consumption and cost records of the below indicated account for a period of no less than five years following the date of this agreement and for the 12 months immediately preceding this agreement. This information is to be used exclusively for the purpose of measuring the impact of the weatherization of the dwelling.

Electricity

Vendor Name	Vendor Address	Account#
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Heating Fuel	<input type="checkbox"/> Oil	<input type="checkbox"/> Natural Gas	
	<input type="checkbox"/> Kerosene	<input type="checkbox"/> Propane (LP) Gas	_____ Other

Vendor Name	Vendor Address	Account#
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Print Name of the Account Holder	Signature of the Account Holder
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Mold and Moisture Checklist

Item for Inspection	Check for	Explanation, if necessary:
Is water damage, wet areas or mold present with regard to:		
Boxes, books, paper	<input type="checkbox"/>	
Carpeting	<input type="checkbox"/>	
Other flooring	<input type="checkbox"/>	
Upholstered furniture	<input type="checkbox"/>	
Drapes	<input type="checkbox"/>	
Walls, wallboard	<input type="checkbox"/>	
Closets	<input type="checkbox"/>	
Ceiling tiles	<input type="checkbox"/>	
Questions regarding the potential for mold or moisture problems:		
Does the area smell moldy or musty?	<input type="checkbox"/>	
Does the roof leak?	<input type="checkbox"/>	
Are there any structural leaks (flashing, windows, etc)?	<input type="checkbox"/>	
Are there any plumbing leaks?	<input type="checkbox"/>	
Is ventilation adequate?	<input type="checkbox"/>	
Is the indoor relative humidity too high?	<input type="checkbox"/>	
Are HVAC drip pans clean and flowing freely?	<input type="checkbox"/>	
Is the HVAC system maintained regularly?	<input type="checkbox"/>	
Is landscaping directing water into or under the building?	<input type="checkbox"/>	
Do gutters direct water into or under building?	<input type="checkbox"/>	

Confirmation of Receipt of Mold and Moisture Pamphlet (Required if any inspection items are marked "yes")

I have received a copy of the pamphlet, *A Brief Guide to Mold, Moisture, and Your Home*, informing me of the potential risks, clean-up and prevention of mold problems in my dwelling unit. I received this pamphlet before the work began.

 Printed name of recipient

 Signature of recipient

 Date

Self-Certification Option (for tenant-occupied dwellings only)

If the mold pamphlet was delivered but a tenant signature was not obtainable, you may check the appropriate box below.

Refusal to sign--I certify that I have made a good faith effort to obtain the required signature for the pamphlet, *A Brief Guide to Mold, Moisture, and Your Home*, to the dwelling unit listed below at the date and time indicated and that the occupant refused to sign the confirmation of receipt. I further certify that I have left a copy of the pamphlet at the unit with the occupant.

Unavailable for signature --I certify that I have made a good faith effort to deliver the pamphlet, *A Brief Guide to Mold, Moisture, and Your Home*, to the rental dwelling unit listed below and that the occupant was unavailable to sign the confirmation of receipt. I further certify that I have left a copy of the pamphlet at the unit by sliding it under the door.

 Printed name of person certifying mold pamphlet delivery

 Signature of person certifying mold pamphlet delivery

 Attempted delivery date and time

Unit Address:

Note Regarding Mailing Option - As an alternative to delivery in person, you may mail the mold pamphlet to the owner and/or tenant. Pamphlet must be mailed at least seven days before renovation. (Document the date with a certificate of mailing from the Post Office.)

LEAD HAZARD EDUCATION FORM

Occupant Confirmation

Pamphlet Receipt

I have received a copy of the **lead hazard information pamphlet** informing me of the potential risk of the lead hazard exposure from renovation activity to be performed in my dwelling unit. I received this pamphlet before the work began.

Printed Name of Owner-occupant

Signature of Owner-occupant

Signature/Date

Renovator's Self Certification Option (for tenant-occupied dwellings only)

Instructions to Renovator: If the lead hazard information pamphlet was delivered but a tenant signature was not obtainable, you may check the appropriate box below.

Declined - I certify that I have made a good faith effort to obtain signatures of the lead hazard information pamphlet to the rental dwelling unit listed below at the date and time indicated and that the occupant declined to sign the confirmation of receipt.

Unavailable for signature - I certify that I have made a good faith effort to deliver the lead hazard information pamphlet to the rental dwelling unit listed below and that the occupant was unavailable to sign the confirmation of receipt. I further certify that I have left a copy of the pamphlet at the unit by sliding it under the door or by:

Printed Name of Person Certifying Delivery

Attempted Delivery Date

Signature of Person Certifying Lead Pamphlet Delivery

Unit Address

Note Regarding Mailing Option - As an alternative to delivery in person, you may mail the lead hazard information pamphlet to the owner and/or tenant. Pamphlet must be mailed at least seven days before renovation. Mailing must be documented by a certificate of mailing from the Post Office.

Unvented Space Heater Agreement Manufactured Home

Date: _____

Customer: _____

Agency: _____

I certify that I have been informed by the Agency representative named below that the weatherization of my home may increase the potential danger of using unvented combustion space heaters.

I agree that any future use of unvented combustion space heaters in my home will be at my own risk, and I will not hold the Agency liable for any damage or injury that may occur as a result of such use.

I understand that Weatherization cannot proceed on my home until all unvented combustion space heaters have been physically removed from the premises.

Customer's Signature

Date

Authorized Agency Representative

Date

Unvented Space Heater Agreement Site-Built

Date: _____

Customer: _____

Agency: _____

I certify that I have been informed by the Agency Representative named below that the weatherization of my home may increase the potential danger of using unvented combustion space heaters.

I agree that any future use of unvented combustion space heaters in my home will be at my own risk, that any such appliances will have an operable Oxygen Depletion Sensor [as per ANSI Standard (Z 21.11.2) and DOE-WPN 08-4], and I will not hold the Agency liable for any damage or injury that may occur as a result of such use.

I understand that Weatherization cannot proceed on my home until all non-compliant space heaters have been physically removed from the premises.

Customer's Signature

Date

Authorized Agency Representative

Date

WEATHERIZATION SERVICE AGREEMENT

This is an agreement between _____ (Agency)

and _____ (Customer) residing at

(Agency) shall provide services including some items listed below, depending on the cost effectiveness of each service and in compliance with the Federal Weatherization Assistance Program specifications AT NO COST TO THE CUSTOMER listed at the above address.

Weatherization Work

- | | |
|--|---|
| _____ 1. Air seal major air leaks | _____ 14. Install Smoke Alarm(s) |
| _____ 2. Insulate the attic | _____ 15. Install Carbon Monoxide Alarm(s) |
| _____ 3. Insulate exterior walls | _____ 16. Vent the clothes dryer |
| _____ 4. Add fresh air ventilation | _____ 17. Perform Lead Safe Work Practices |
| _____ 5. Insulate the crawlspace | _____ 18. Replace the main refrigerator |
| _____ 6. Weatherstrip exterior doors | _____ 19. Replace light bulbs with compact fluorescent lights |
| _____ 7. Clean and tune the heating unit | _____ 20. Carbon Monoxide mitigation |
| _____ 8. Replace the heating unit | _____ 21. Back drafting issues at the following appliances: |
| _____ 9. Install a programmable thermostat | _____ |
| _____ 10. Vent the heating unit | _____ 22. Fuel leaks at _____ |
| _____ 11. Vent the water heater | _____ 23. Removal or disconnection of knob & tube wiring |
| _____ 12. Install an exhaust fan | _____ 24. Seal and Insulate Ducts |
| _____ 13. Vent the existing kitchen/bath fan | _____ 25. Other: _____ |

I agree to the weatherization, energy conservation, and health and safety work scheduled to be completed on my home.

I understand that by signing this agreement that I must provide representatives of the Weatherization Assistance Program access to the home to inspect the work performed under this agreement.

I understand that by declining one or more items on the list above, I may not receive any Weatherization work on my dwelling. This agreement may be amended only in writing signed by the customer and the Agency.

Customer Signature

Date

Agency Representative Signature

Date

Deferral of Service Notification

Name: _____

Date: _____

Address: _____

Agency Name: _____

City/Zip: _____

Agency Address: _____

Assessment

Date: _____

Assessor: _____

It is the policy of this Agency to provide weatherization services to properties that do not contain hazards so that our staff may perform those services effectively and safely. When your property was recently assessed, the following hazardous conditions checked below were noted.

Standing water, mold, friable asbestos, deteriorated lead-based paint surfaces or other hazardous materials, that cannot be addressed by the weatherization work.

Evidence of infestations of rodents, insects, and/or other vermin.

Un-vented space heater(s) that may have a harmful effect on the air quality of the home.

Unsecured pets that may prevent workers from safely completing their work.

The presence of sewage or animal feces in and around the home.

Improperly stored chemicals, combustible materials, or other fire hazards that present a danger to the occupants or the workers.

Maintenance or housekeeping practices that limit the access of workers to the dwelling or create an unhealthy work environment.

Major remodeling is in progress, which limits the proper completion of major weatherization measures.

The home receives HUD funding and at the time of completion, the unit will not meet HUD Lead-Based Paint standards.

Electrical or plumbing hazards, or structural failures that cannot be addressed as a part of weatherization services.

Threat(s) of violence or abusive behavior to worker(s) or household member(s) during the weatherization process.

The presence or use of any illegal controlled substance in the home during the weatherization process.

Dwelling was weatherized previously (after September 30, 1994).

Occupant has known health conditions that prohibit the installation of insulation or other weatherization materials.

Other: _____

- 1** Our Agency will provide weatherization services to your property once repairs and/or required changes to the hazardous conditions checked above have been completed/alleviated. Those improvements must be completed by _____ (date) in order to proceed under the current weatherization application. If repairs are not made within this time frame, you will need to submit a new application for weatherization services.
- 2** This notice has been sent to you by certified mail so that our Agency is able to verify receipt. If you have any additional questions about your options, please contact our Agency. If you understand all your options, please sign below and return this form to our office by using the enclosed self-addressed envelope within ten (10) days.
- 3** If you feel that our inspector has made a mistake in his determination that hazardous conditions exist, please contact our Agency and we will re-assess your home as soon as it is reasonable.
- 4** Please note that our Agency will not take any further action until we receive communication from you as the Owner/Agent of the property. If we do not receive any communication from you within ten (10) days, your application is void.

(Print your name)

(Signature)

(Date)