



Weatherization Assistance Program

Dear Prospective Client,

Thank you for your interest in the Weatherization Assistance Program (WAP). Enclosed is an application. If you are interested in determining whether you qualify for this energy assistance program, please complete in full and sign the application and return it to our office along with the following:

- 1) **Verification of Income.** This should include income documentation for everyone living in the home for the last 12 months. (i.e. a **copy** of the following: check stubs, verification notices from Social Security or other agencies, alimony and child support, and/or a copy of your most recent tax returns)
- 2) **Verification of Home Ownership.** For a site built home, documentation can include a **copy** of the property tax statement, or the deed. Mobile Homes must include a Bill of Sale or the Title.
- 3) **Verification of Residency.** This can include a **copy** of your most recent energy bills showing **your** name and address. If you have two (2) utilities, i.e. gas and electric, please include copies of each. **Also please include (if applicable) a summary from both the Electric and Gas companies showing the last 12 months of gas and electricity usage. If you receive energy assistance (LIHEAP) please include the most recent documentation of payment.**
- 4) **Proper Identification of Everyone Living in the Home.** This includes copies of government issue **photo ID** and social security cards. For each child less than 18 years old, please include documentation of date of birth, i.e. birth certificate, and current school grade.
- 5) **Property Report Card.** This document can be obtained from your local court house. Also, any other documentation stating the date your home was built is acceptable. Note: This item is not applicable for Mobile Homes.

Please know that your application for assistance will be incomplete without all of the above supporting documentation unless otherwise stated by this office. Once you have completed and signed the application, please **send the completed application and documentation** to the address shown below.

If you are selected for assistance, you should know that the WAP is solely intended to decrease energy loss in your home, therefore decreasing your utility bills. This is not a home repair service. We will not perform any work when other repairs hindering weatherization work are to be completed in advance. Such repairs (if needed) will be clearly defined for the homeowner. The WAP is provided at **no cost** to qualifying clients and homes as long as funding is available.

If you have any questions regarding the program or its application, please feel free to call our office at the number listed below.

Sincerely,

The Weatherization Assistance Program

Date Received: _____

Job # _____

WEATHERIZATION ASSISTANCE APPLICATION

Central Alabama Regional Planning and Development Commission - CARPDC

430 South Court Street, Montgomery, Alabama 36104

Ph. (334) 262-4300 Weatherization 1-866-780-4945

PART A: REQUIRED INFORMATION

LAST NAME		FIRST NAME, MIDDLE INITIAL		SOCIAL SECURITY NUMBER		
ADDRESS		CITY/TOWN		ZIP CODE	COUNTY	
RACE 1. <input type="checkbox"/> WHITE 2. <input type="checkbox"/> AFRICAN AMERICAN 3. <input type="checkbox"/> HISPANIC 4. <input type="checkbox"/> AMERICAN INDIAN 5. <input type="checkbox"/> ASIAN 6. <input type="checkbox"/> OTHER		EMAIL ADDRESS	TELEPHONE NUMBER(S) ** 2 numbers required ** 1. _____ - _____ - _____ 2. _____ - _____ - _____		SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	AGE OF APPLICANT
NO. OF PERSONS 17 YEARS OF AGE OR YOUNGER IN HOUSEHOLD _____		IS ANY HOUSEHOLD MEMBER DISABLED? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF SO, WHO? _____		
NO. OF PERSONS 18 YEARS OF AGE OR OLDER IN HOUSEHOLD _____		IS ANY HOUSEHOLD MEMBER ELDERLY (60+)? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF SO, WHO? _____		
NO. OF MIGRANTS & SEASONAL FARM WORKERS IN HOUSEHOLD _____						
IS YOUR RESIDENCE: 1. _____ OWNED BY HOUSEHOLD MEMBER 2. _____ RENTED, BUT WITH FUEL INCLUDED IN RENT 3. _____ RENTED, BUT HOUSEHOLD PAYS FOR FUEL		1. DOES THE GOVERNMENT PAY ANY OF YOUR RENT OR HOUSE PAYMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO 2. HAS THIS DWELLING EVER RECEIVED WEATHERIZATION ASSISTANCE IN THE PAST? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, GIVE DATE OF ASSISTANCE _____				

WHICH FUEL IS USED MOST FOR HEATING? (CHECK ONE):1. ELECTRICITY 2. NATURAL GAS 3. LP GAS 4. KEROSENE 5. FUEL OIL 6. WOOD/COAL 7. OTHER _____**WHICH TYPE HEAT SOURCE IS USED? (CHECK ONE)** HEAT PUMP HVAC (CENTRAL HEAT and AIR) GAS SPACE HEATER(S) ELECTRIC SPACE HEATER(S) FIREPLACE OTHER**TYPE OF STRUCTURE:** WOOD FRAME BRICK MASONRY MOBILE HOME MULTI UNITIS HOME AIR-CONDITIONED? YES NO**DATE OF BIRTH:**

Include all Household Members

NAME & RELATION
MM / DD / YY

____/____/____

____/____/____

____/____/____

____/____/____

____/____/____

____/____/____

PART B REQUIRED DOCUMENTATION:*The following information must be provided or your application will be considered incomplete:*

- * **Identification** (copy of drivers license and social security card for each occupant)(please include Birthdates & School Grade)
- * **Proof of Income** (i.e. pay stub, Social Security statement, retirement or pension statement, of each occupant 19 and older)
- * **Proof of Property ownership** (i.e. copy of deed or property tax notification)
- * **Proof of Residency** (i.e. copy of energy bills [electrical and gas bill] showing owner's name and address.)
- * **Property Report Card** (obtained from local Court House; however, n/a if your home is a Mobile Home)
- * **Do you receive Energy Assistance (LIHEAP)?** If so, Please provide current documentation of payment.

PART C STATEMENT OF AFFIRMATION:

1. I certify that the information I have provided is true and correct to the best of my knowledge. I hereby give my consent for the Central Alabama Regional Planning and Development Commission (CARPDC) Weatherization Assistance Program (WAP) to verify the information I have given. **I understand that I am subject to any applicable Federal or State laws concerning fraud or knowingly providing false or incomplete information in order to obtain assistance.**
2. I understand I have the right to a hearing pending dissatisfaction with my application and or its process. I understand that if Mold contamination is encountered any time during the Weatherization process, work will cease until properly remediated. I also understand I am responsible for securing a licensed Mold Remediator.
3. I hereby grant and authorize CARPDC and their duly appointed agents the right of entry to my residence to conduct inspections, prepare bids and make repairs. Further, I hereby release and pledge to hold blameless CARPDC and their duly appointed agents from any liability arising from the performance of this weatherization work related to this authorization or eventually arising there from.

Applicant's Signature: _____ Date: _____