



Enclosed please find an application for the Weatherization Assistance Program (WAP) services. Please complete, sign & date the application and intake form and submit all the information below that pertains to you.

If you own your home please include verification of home ownership.

Verification of home ownership includes (one of the following):

1. Copy of the Deed
2. Copy of Title if Mobile Home
3. Verification from local county Register of Deeds Office
4. Copy of "Contract for Deeds". Must be legally valid and notarized
5. Current Copy of Property Tax Statement

If you are a renter, a rental agreement must be signed by yourself & the landlord, authorizing us to do the estimate on your home. Your landlord will be required to pay a contribution of \$150 if utilities are included in the rent. If you have a "Contract for Deed" a copy must be submitted for our files.

Please provide us with a utility report of the last 12-months of electricity & fuel usage/costs, or an (estimated yearly amount) if you have not lived at the address for 12 months. Your suppliers can fax the information to **(746-0406)**.

If you've been approved for fuel assistance, you qualify for our program. Please ask your County Heating Assistance office to fax us your data sheet which is verification of your income. If you are denied fuel assistance or do not intend to apply for that program, you must provide verification of your income.

All household income must be reported on the application, but only include one of the following:

1. **Employment:** Past 12 months: Can be print out from your employer (or) copies of each pay stub for all persons living within the household.
2. **IRS Income Tax Return** for the past year.
3. **Unemployment or Workers Comp.**
4. **Benefits:** Social Security-Disability-Veteran's-Retirement/Pensions=Copy of your letter will work!
5. **SSI, TANF, School Grants or Alimony**

Once we've received all of the above information and your application is approved you will receive an approval letter. If your application is denied, you will receive notification by mail. If you change your address, name, phone number(s) or other pertinent information after you submit your application, please call our office and inform us as soon as possible! If you have any questions or do not hear from us within 4-5 weeks, please contact our office at 746-5431 or 1-800-450-1823.

Application for North Dakota Low Income Weatherization Program
 Red River Valley Community Action
 1013 North 5th Street
 Grand Forks, ND 58203

<u>Name:</u>	<u>Phone #:</u>	<u>Cell #:</u>
<u>Address:</u>		
<u>City:</u>	<u>State:</u> North Dakota	<u>Zip Code:</u>
<u>Social Security #:</u>	<u>County:</u>	
<u>Directions to your Home:</u>		
<u>Eligibility Data:</u> Please Check all that apply:		<u>Income: Please enclose copies of income verification.</u>
<input type="checkbox"/> Elderly <input type="checkbox"/> Handicapped <input type="checkbox"/> Caucasian <input type="checkbox"/> Native American <input type="checkbox"/> Other _____		Social Security: _____ Disability: _____ SSI: _____ Retirement: _____ Vet Benefits: _____ TANF: _____ Unemployment: _____ Employment: _____ Other: _____
Total number of people living in household: _____		
Ages (s) of everyone in household: _____		
Are you currently on Fuel/Heating Assistance? _____ Yes _____ No (If yes, contact County Social Services and ask them to fax your data sheet to 701-746-0406)		
<u>Occupancy Status:</u> (circle one) OWNER RENTER		<u>Years at Address:</u> _____
<u>Dwelling Type:</u> (Check one)		<u>Number of Rooms with Doors:</u> _____
<input type="checkbox"/> Single Family Home <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Unit Complex		<u>Number of Windows:</u> _____
		<u>Number of Stories(in Single Family Home or multi-Units):</u> _____
<u>Year Built:</u> _____		

THE INFORMATION PROVIDED ME TO ESTABLISH MY ELIGIBILITY IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

I authorize the release of all employment/income, utility/fuel records the purpose of obtaining data required to determine eligibility and for evaluation of energy conserving effectiveness of the work done.

The undersigned specifically acknowledges the residence is not currently for sale, nor is it designated for acquisition, clearance or foreclosure by federal, state or local programs and has not been weatherized previously (unless work was performed prior to Sept. 30, 1994).

I agree to allow my home to be photographed for pre-and post work documentation.

I further consent to the inspection and weatherization of my home by authorized personnel for the purpose of estimating and performing the weatherization work, including the final inspection.

Do you or any member of the household have any existing health problems that may become exacerbated by the weatherization measures that may be performed on your home? If so, please explain: _____

Signature of Applicant

Date

Fuel Form

1. Primary Heating Source:

- Electricity Propane Wood
 Oil Natural Gas Other _____

2. Heating System:

- Hot Water Baseboard Electric Other _____
 Hot Air Space Heater

You, the applicant, will be responsible for providing us with a utility report of the last 12-months of electricity & fuel usage/costs. If you are an Xcel Energy customer please provide us with your account number (below) so we can get the usage for you. Your suppliers can fax the information to (746-0406). Attention Tiffany.

3. Vendors (Main Energy Suppliers):

Electric Vendors:

- Xcel Energy
 Ottertail Power
 Nodak Electric
 Other: _____

Fuel Vendors (N. Gas, Propane, Oil, etc):

- Xcel Energy
 MDU
 Mutch Oil
 Ferrell Gas
 Other: _____

Xcel Account #: _____

4. Monthly Payments:

Electric payment per month: \$ _____

Heat payment per month: \$ _____

Any and all information regarding clients will be kept confidential. All application and eligibility-determination information will be protected against discriminate access by RRVCA staff and will not be made available for public view.

Agency Review:

Application Status: _____ Approved: _____ Disapproved-Reason: _____
By: _____ Date: _____