

Weatherization Request Questionnaire
 Please fill out completely



DATE: _____ HOME PHONE: _____ CELL PHONE: _____ EMAIL: _____
 NAME: _____ ADDRESS: _____

CITY, ZIP: _____ Directions to your home: _____
 Best Day to schedule work at your home (Monday through Thursday): _____

HOUSE TYPE Rent: _____ Own: _____ ** How long at this address: _____
 Landlord's Name and Address: _____ Landlord's Phone: _____
 Is home for sale: _____

** *owners* of mobile homes must provide proof of ownership (DMV title if paid off or purchase contract if making payments) prior to audit or home will be considered a rental - no exceptions

House: _____ Duplex: _____ Apt: _____ Year built: _____

Mobile/manuf. home: _____ Size of Mobile Home: _____

Insulation in the attic: _____ Walls: _____ Underfloor: _____

Water heater is gas/electric - how old?: _____ Does the roof leak? _____

Do you have broken windows: _____

Would you be interested in information on CSC's housing rehabilitation repair loan programs (must own your home)? yes no

Household: 1.) # of people: _____ 2.) # of people over 60 and/or disabled: _____ 3.) #of adults: _____ 4.) children under 6: _____

Is any one in the home Native American: _____ If yes, which tribe: _____

Is there anyone in your home with medically documented respiratory problems (asthma, use of oxygen, etc.): _____
 Is there any mold present in your home? _____ If yes, where is the mold located? _____

Has your home (current or past) been weatherized through our program previously: _____ If so, when: _____
 Additional Information/Questions: _____

Have you received Energy Assistance (IEAP) this year: _____ If so, which office: _____

Due to funding issues and the high volume of requests we receive, submission of a Weatherization application does not guarantee you will be served within the year.
 We will contact you for updated information if your application expires before you receive services

Job Number: _____ IEAP Authorization Number: _____

PRIMARY HEATING SYSTEM/WATER HEAT
 Electric: baseboard: _____ space heaters: _____ furnace: _____
 Natural Gas: wall heaters: _____ furnace: _____ stand alone: _____

Oil/Propane: furnace: _____ stand alone: _____
 Wood: stove: _____ pellets: _____

Condition of System: _____

Is your heating system serviced regularly? **yes no**

What weatherization measures does your home need? _____

What is your highest monthly heating bill? _____

Account Number: _____ Consumer's Power: _____ Northwest Natural: _____
 Pacific Power: _____ Other: _____ Central Lincoln PUD: _____

Weatherization Services Agreement

Client / Applicant Name: _____

Address: _____

By my signature below, I certify that I am the owner/landlord/authorized agent for the property listed above and, as such, permit CSC to weatherize this property. I understand that normal materials and labor will be provided free of charge and that no liens will be placed on the property as a result of this service. I also understand, however, that opportunities may exist, on a case-by-case basis, for me to contribute toward contracts for additional work.

Dry Rot Disclaimer: In the event dry rot/structural issues exist in spaces intended for window/furnace replacement, the weatherization program will halt work immediately, notify the homeowner/landlord, and not be held responsible. Repair of any property is the sole responsibility of the homeowner/landlord, and any necessary dry rot repairs must be completed prior to any payments being issued by CSC. Additionally, CSC will not make any payment to contractors until materials are installed and a final inspection is completed.

In consideration for the Weatherization services provided by CSC, I agree to the following:

1. The weatherization workers will be permitted to use, at no cost, lights, heat, power, and water necessary to carry out and complete the work, and the homeowner/tenant will cooperate with the weatherization workers to facilitate the performance of the work, including the removal and replacement of rugs, coverings, furniture, storage in attics, items against outside walls (if we're to insulate), removal of animal droppings in yards, etc., as necessary;
2. If the value of the dwelling is increased as a result of weatherization services, I will not on this basis alone raise the current tenant's rent for one year;
3. As long as the tenant is in compliance with the duties and obligations of the rental agreement, I will not evict him/her for one year from the date the work is completed;
4. If I sell the property during the one-year term of this agreement, I will inform CSC in writing. If the purchaser does not assume this agreement, I will be responsible for reimbursement of weatherization costs on a pro-rated basis;
5. I hereby release and hold harmless CSC and its weatherization staff from any and all liabilities, claims, damages, losses and expenses not related to installation of weatherization measures and/or any occurrence resulting from audit, performance of weatherization services or inspection of the completed work.
6. Any exceptions to work specified in the audit or other special arrangements are:

I hereby authorize CSC to inspect the work performed by its Weatherization Crew as well as obtain heating, fuel and utility billing records of my home for the sole purpose of evaluating the effectiveness of the Weatherization work. This authorization also directs the pertinent utility and fuel companies to make such records available to CSC.

Owner/Landlord/Authorized Agent

Address and Phone

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