

Weatherization Assistance Program Application



COLORADO
Energy Office

Weatherization Assistance Program

Instructions

All applications and questions should be submitted directly to your local weatherization service provider

Homes that are currently under construction, have been weatherized within the past fifteen years, are currently listed for sale, or are anticipated to be placed on the market **are not eligible for weatherization.**

Gather documents and information to submit:

- **Photo Identification** (applicant's current or valid within the last 10 years)
- **Every person living in the home must be included in the application.**
- **Program Qualification Choose Option 1 OR Option 2**
 - **Program Qualification Option 1 - Enrollment in a Public Assistance Program:**
Provide a public assistance benefit letter if anyone living in your home receives public assistance: Aid to the Needy Disabled (AND), Low-income Energy Assistance Program (LEAP), Supplemental Nutrition Assistance Program (SNAP), Supplemental Security Income (SSI), Temporary Assistance to Needy Families (TANF).
 - **Program Qualification Option 2 - Household Income Documentation:**
If no one in your home receive public assistance benefits, please gather income verification for the household's total gross income before taxes and deductions.
Proof of income can include one of the following:
 - The last three months of income for **every person 18 years old or older in the household.**
 - The previous year's income tax documentation with signature.
 - **Income is considered cash receipts from the following sources:**
 - Money, wages, and salaries, before any deductions.
 - Net receipts from non-farm or farm self-employment.
 - Regular payments from social security, supplemental security, railroad retirement, unemployment compensation, strike benefits from union funds, worker's compensation, veteran's payments, training stipends, alimony, and military family allotments.
 - Private pensions, government employee pensions (including military retirement pay), and regular insurance or annuity payments.
 - Dividends and/or interest.
 - Net rental income and net royalties.
 - Periodic receipts from estates or trusts.
 - Net gambling or lottery winnings.
 - If your household has no income, you are self employed, or you do not receive pay stubs from your employer, call your local weatherization service provider to receive a form to complete.

Important: Do not return this page with your application. This is just for your reference.

Instructions Cont.



■ Utility Information:

- **Your energy provider account number** (e.g. Xcel, Black Hills, Atmos)
- **Premise number**, if your provider is Xcel Energy. This can be found on the second page of your utility bill.
- **Utility consent forms are required for the following utility providers:** Xcel Energy, Atmos, Colorado Natural Gas, Black Hills Energy, Holy Cross Energy. The local weatherization service provider will provide the form after you submit your application.

■ Lawful Presence Affidavit:

- Applicants qualified via enrollment in a Public Assistance Program may skip that page.
- All applicants who are lawfully present and qualify through household income must submit a completed lawful presence affidavit with their application.
- **Applicants without lawful presence do not need to complete the affidavit and should skip that page.**
 - Pursuant to Colorado Senate Bill 21-199, as of July 1st 2022, individuals without lawful presence may receive assistance without providing lawful presence documentation or completing a lawful presence affidavit and with the assurance that all personal and identifying information is protected by Colorado Energy Office Weatherization Assistance Program Policy 303, Client Confidentiality.

■ Renters: The property owner or manager must complete the consent agreement for you to submit with your application.

■ Appeals:

- Once a complete application, which includes all required supporting documentation, is received by your local weatherization service provider, your application will be processed in a timely manner. If you are denied services, you may appeal the decision using the following appeals procedure:
 - First appeal to the local weatherization service provider in writing. A Manager or Director will respond in writing within 15 business days of receipt of the notice of appeal.
 - If the Manager or Director denies services, and you disagree, you have 30 calendar days after receiving the written notification to appeal to the Colorado Energy Office Weatherization Program (CEO WAP).
 - CEO WAP will have 15 days to respond in writing to the appeal and the decision will be considered final.
 - The appeals to CEO WAP may be emailed to: weatherization@state.co.us or mailed to: Colorado Energy Office Weatherization Program, 1600 Broadway, Suite 1960, Denver, CO 80202

Please return application and all documents to:

Important: Do not return this page with your application. This is just for your reference.



Weatherization Assistance Program Application

Homes that are currently under construction, have been weatherized within the past fifteen years, are currently listed for sale, or are anticipated to be placed on the market are not eligible for weatherization services.

Applicant Information

(Please write in print)

First, Middle, & Last Name: _____

Street address with unit: _____

City, County, & Zip: _____

Mailing address, if different from street address: _____

Primary phone number(s): _____

Email address: _____

How did you hear about WAP? _____

Household Member Information

Please list every person living in your home, including yourself (attach an additional sheet if necessary).

Full Name	Age	Has a disability	Indigenous American	Race/ Ethnicity	Gross Monthly Income	Source of Income

- ☐ Check this box if anyone in the household is on oxygen.
- ☐ Check this box if anyone in the household has allergies or hyper-sensitivities to dust, fiberglass, cellulose, mold, latex, or common building materials.
- ☐ Check this box if anyone in the household has any visual, auditory, or any other disability that will require reasonable accommodation.

Home Information

If you rent your home, the **Property Owner/Manager** must complete the consent form on the last page.

What year was your home built? _____

Do you rent or own your home?

Rent

Own

Is your home currently under construction?

Yes

No

What kind of home do you have?

- ☐ Single Family Detached House
- ☐ Manufactured / Mobile home
- ☐ 2/3/4-plex
- ☐ Multifamily (5+ units)
- ☐ Other:

Utility Information

Heating Fuel Type (e.x. Electric, natural gas, propane, oil, wood/pellets, coal): _____

Heating Utility Provider and Account Number (Account number can be found on your utility bill): _____

Electric Utility Provider and Account Number (Account number can be found on your utility bill): _____

Premise Number (Xcel customers only, found on the second page of your utility bill): _____

Program Qualification Choose Option 1 OR Option 2

Option 1 Qualify Through Enrollment in a Public Assistance Program

If you, or any member of your household, currently receive benefits from the public assistance programs listed below, you may automatically qualify and verification of household income may not be necessary.

Check all of the benefits your household currently receives:

- ☐ AND (Aid to the Needy and Disabled)
- ☐ SSI (Supplemental Security Income)
- ☐ SNAP (Supplemental Nutrition Assistance Program)
- ☐ LEAP (Low-income Home Energy Assistance Program)
- ☐ TANF (Temporary Assistance for Needy Families)

**You must provide a
public assistance benefit letter if
you are qualifying through
Option 1**

Option 2 Qualify Through Household Income Documentation

Submit income information for every person 18 years old or older that lives in the home.

If you check an option that asks you to provide a WAP Form, please call your local service provider for more information. **Check all that apply:**

- | | |
|--|--|
| ☐ Most recent income
Provide: Previous 3 months of pay stubs for every household member 18 years and older | ☐ Unemployment benefits |
| ☐ Self-employment income
Provide: WAP Form 'Certification of Income for Self-Employed Applicants' and relevant documentation | ☐ Social Security Assistance (SSA) income |
| ☐ The entire household has no income or no proof of income
Provide: a notarized WAP Form 'Affidavit of Income or No Income' | ☐ Most recent IRS Tax Return Form |
| ☐ 3rd Party certification of income
Provide: a letter on letterhead, the WAP Form 'Third-Party Certification Form', or other official verification of income from income source | ☐ Social Security Disability Income (SSDI) |
| | ☐ Alimony |
| | ☐ Worker's Compensation benefits |
| | ☐ Retirement benefits |
| | ☐ Other: _____ |



Applicant Consent

Information Sharing Consent Form

For other community services programs:

There are other programs outside of the Weatherization Assistance Program and Colorado Energy Office (CEO WAP) that may help you lower your utility bill (for example, community solar programs). If you would like CEO WAP to share your name and contact information (address, phone number, email) with your utility provider for the purposes of receiving additional information about these programs, please agree below:

- ☐ I consent
- ☐ I do not consent

For the Electric and Gas Service Affordability Programs

- There are programs designed to ensure income-qualified consumer's payments are based upon their income and ability to pay for their utilities. Consumers may qualify for Electric and Gas Service Affordability Programs after they have worked with the Colorado Low-income Home Energy Assistance Program (LEAP) or CEO WAP program to determine eligibility.
- For some utility companies, there are Electric and Gas Service Affordability Programs that ensure income-qualified consumers are only paying a specified or set percentage of their monthly income on electric and natural gas bills. Consumers may qualify for these programs after they have worked with the LEAP or WAP program to determine eligibility. If you receive utility service from Xcel Energy, Black Hills Energy, Atmos Energy, or Colorado Natural Gas, and would like CEO WAP to share your name, contact information (address, phone number, email), and income with your utility provider for the purposes of learning more about affordability programs, please agree below:

- ☐ I consent
- ☐ I do not consent

Home Access Authorization

Access to your home: Colorado weatherization technicians and contractors must be given access to all rooms and spaces in your home. **Technicians and contractors must have clear access to heating systems, attic, crawlspace and exterior doors and windows.** Work will occur during business hours and on a reasonable schedule. A State Quality Assurance Inspector may also return within one year of work completion to inspect the work, including conducting safety and diagnostic testing. Please note, These areas must be reasonably hygienic and clear of debris and clutter. Otherwise, services may be impacted. If you have concerns please contact your local weatherization service provider.

- ☐ I agree to home access ☐ I do not agree to home access

Permission to photograph home: Colorado weatherization technicians, contractors, and other staff may photograph the unit for pre and post-work documentation. *Photographs and any identifying information will be kept private.

- ☐ I agree ☐ I do not agree



Applicant Signature Page

Applicant must sign this section.

If you rent your home, the Property Owner or Manager must sign the consent form on the last page.

You (the applicant, homeowner or the tenant) are applying to the Colorado Energy Office Weatherization Assistance Program (CEO WAP). If the application is approved, the applicant will be eligible to receive free energy efficiency services that will help the household save money on energy bills and live in a space that is comfortable and safe. The goal of CEO WAP is to provide maximum improvements to comfort, energy savings, and safety.

WAP services include an energy audit and safety diagnostics of the home. The energy audit will determine what energy savings measures can be provided at no charge. These free measures may include additional attic, wall, and floor insulation, air sealing, ventilation, replacing a highly inefficient refrigerator, and/or furnace or hot water heater repairs.

In order to provide the maximum improvement in comfort, energy savings, and safety, CEO WAP assesses all areas of the home. In some cases, making these improvements to the home can be moderately invasive. If you want more information on what may occur, please contact the service provider.

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 CEO WAP serving my property.

☐ I give my consent, but have concerns about: _____

Please Read This Section Carefully:

By my signature below I authorize Colorado weatherization staff and crew to enter the home (as identified in my application) as needed to perform weatherization work as suited to this property under CEO WAP standards. Upon completion of work, I give permission for the contractor, sub-contractor staff, local, state, and federal officials to inspect said work. I hereby release the State of Colorado and its agencies, officers and employees, including but not limited to CEO WAP from any liability.

In addition, I hereby waive any right of action from any and all causes and claims that I may have. I further agree not to sue on any such cause or claim. To the extent I have consented for CEO WAP to release my information to a utility, or have my home photographed, I agree to defend and indemnify and hold the State/CEO WAP harmless for any losses, judgments, or damages that I may incur due to the release of my personal information or photographs.

In addition, I agree to defend and indemnify and hold the State/CEO WAP, harmless for any losses, judgments or damages that may be incurred, including but not limited to attorneys' fees, arising out of any lawsuit related to this application and in connection with the performance of weatherization assistance or any act or eventuality arising from this work.

I attest that the information on this form/application is correct and complete. I acknowledge that providing false, inaccurate, or incomplete information may result in termination of participation in the program and possible criminal liability.



Applicant Signature Page Cont.

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. Any personal identifiable information released is only done so with a signed consent from the client.

I further attest that the property is not presently for sale, nor is it designated for acquisition or clearance (foreclosure) by a federal, state, or local program.

- For Tenants: Permission can only be granted by the Property Owner or Manager of the home. This represents the final decision related to weatherization concerns.
- Client complaints regarding rent being raised due to the increased value of WAP upgrades to the dwelling unit should be directed to the agency weatherizing their home.
- Pursuant to Colorado Senate Bill 21-199, as of July 1st 2022, undocumented individuals may receive assistance without providing lawful presence documentation or completing a lawful presence affidavit AND with the assurance that all personal and identifying information is protected by Colorado Energy Office Weatherization Assistance Program Policy 303, Client Confidentiality.

Applicant Signature: _____ Date: _____

Weatherization staff to fill out:

Application Completion Date:	Application Approval Date:	Application Expiration Date:	
Unit Previously Weatherized ☐ Yes ☐ No	Previously Weatherized Date (if applicable):	Qualifier:	SMI/FPL/AMI :
Year Built:	Compass Checked: ☐ Yes ☐ No	Registered Historic Property? ☐ Yes ☐ No	
Job #	Staff Signature:	Date:	



Important: If you are not a lawfully present resident you **do not** need to fill out the Lawful Presence Affidavit. You may still be eligible to receive assistance regardless of your lawful presence status.

Important: Enrollment in an approved public assistance program verifies lawful presence. If you qualified using Option 1: Qualify Through Enrollment in a Public Assistance Program, **skip this page.**

Lawful Presence Affidavit

If you are a United States citizen, or a Permanent Resident of the United States, or lawfully present in the United States pursuant to Federal law you are required to complete the following Lawful Presence Affidavit form.

Pursuant to Colorado Senate Bill 21-199, as of July 1st 2022, undocumented individuals may receive assistance without providing lawful presence documentation or completing a lawful presence affidavit AND with the assurance that all personal and identifying information is protected by Colorado Energy Office Weatherization Assistance Program Policy 303, Client Confidentiality.

Federal Lawful Presence Affidavit

I, (fill in your name) _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that **(only check one)**:

- ☐ I am a United States citizen
- ☐ I am a Permanent Resident of the United States
- ☐ 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 federal public benefit. I understand that federal 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: _____



Property Owner or Manager Consent Form

This form must be signed by the Property Owner or Manager if the applicant is a renter.



For Owners/Managers: In addition to agreeing to the below, you also agree rent shall not be raised due solely to the increased value weatherization provides to the dwelling unit.

Your tenant is applying to the Colorado Energy Office Weatherization Assistance Program (CEO WAP). If the application is approved, the applicant will be eligible to receive free energy efficiency services that will help the household save money on energy bills and live in a space that is comfortable and safe. The goal of CEO WAP is to provide maximum improvements to comfort, energy savings, and safety.

WAP services include an energy audit and safety diagnostics of the home. The energy audit will determine what energy savings measures can be provided at no charge. These free measures may include additional attic, wall, and floor insulation, air sealing, ventilation, replacing a highly inefficient refrigerator, and/or furnace or hot water heater repairs.

In order to provide the maximum improvement in comfort, energy savings, and safety, CEO WAP assesses all areas of the home. In some cases, making these improvements to the home can be moderately invasive. If you want more information on what may occur, please contact the service provider.

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 CEO WAP serving my property.

☐ I give my consent, but have concerns about: _____

By my signature below I authorize Colorado weatherization staff and crew to enter the home (as identified in my application) as needed to perform weatherization work as suited to this property under CEO WAP standards. Upon completion of work, I give permission for the contractor, sub-contractor staff, local, state, and federal officials to inspect said work. I hereby release the State of Colorado and its agencies, officers and employees, including but not limited to CEO WAP from any liability. In addition, I hereby waive any right of action from any and all causes and claims that I may have. I further agree not to sue on any such cause or claim. To the extent my tenant has consented to have my home photographed, I agree to defend and indemnify and hold the State/CEO WAP harmless for any losses, judgments, or damages that I may incur due to the release of photographs. In addition, I agree to defend and indemnify and hold the State/CEO WAP, harmless for any losses, judgments or damages that may be incurred, including but not limited to attorneys' fees, arising out of any lawsuit related to this application and in connection with the performance of weatherization assistance or any act or eventuality arising from this work.

I attest that the information on this form/application is correct and complete. I acknowledge that providing false, inaccurate, or incomplete information may result in termination of participation in the program and possible criminal liability.

I further attest that the property is not presently for sale, nor is it designated for acquisition or clearance (foreclosure) by a federal, state, or local program.

Owner/Manager Name: _____

Owner/Manager Address: _____

Applicant Rental Address: _____

Owner/Manager Email _____ Phone: _____

Owner/Manager Signature: _____ Date: _____