

# ENERGY EFFECIENCY PROGRAM APPLICATION

Name: \_\_\_\_\_ HIGH PIP:

Address: \_\_\_\_\_ Home phone: \_\_\_\_\_

Apt : \_\_\_\_\_ Ward: \_\_\_\_\_ Work phone: \_\_\_\_\_

City: \_\_\_\_\_ Other phone: \_\_\_\_\_

Zip: \_\_\_\_\_

Gas Account number: 

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Illuminating Co. (CEI)  
 Cleveland Public Power (CPP)

Electric Account number: 

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Water Account number: 

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**\*\*\*YOU MUST INCLUDE: PROOF OF INCOME, A COPY OF A RECENT GAS, ELECTRIC AND WATER BILL, AND PROOF OF HOMEOWNERSHIP \*\*\***

Do you own your home or rent? Own  Rent  Any handicapped persons in household? Yes  No

Is this a single or multi-family home? Single  Multi-family  Age of home \_\_\_\_\_

If multi-family, how many units/apartments in the building? \_\_\_\_\_ Are you now on the PIP Program? Yes  No

Have you received HEAP assistance in past 12 months: Yes  No

Has your home ever been insulated or your heating system replaced through any Weatherization Assistance Program?

Yes  No  If yes, which agency and when? \_\_\_\_\_

**List all persons who live in your home, including yourself:**

Name	Age	Name	Age
1.		7.	
2.		8.	
3.		8.	
4.		10.	
5.		11.	
6.		12.	

**Of the above listed members in your household, does anyone stay at home all day? Yes \_\_\_\_\_ No \_\_\_\_\_**

Total gross annual income (include all incomes in household): \$ \_\_\_\_\_.

I certify that the information given by me in this application is true to the best of my knowledge and I understand that this information is subject to verification. I understand that by signing this application, I authorize the Cleveland Housing Network, its representatives or designees to inspect and evaluate actual services provided to me, and to use any information provided on this form for that purpose. I understand that all work will be completed at no charge to me or my family.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR OFFICE USE ONLY: \_\_\_ PIPP \_\_\_ INCOME VERIFIED BY \_\_\_\_\_

# HOMEOWNER AUTHORIZATION FORM FOR ENERGY EFFICIENCY PROGRAM

I CERTIFY THAT I AM THE HOMEOWNER OR AUTHORIZED AGENT FOR THE PROPERTY AT:

(Property address) \_\_\_\_\_

I certify that I give my permission to allow weatherization and/or energy conservation work to be done on my property listed above. I understand that all work will be completed at no charge to me or my tenant. I give my permission to have any necessary weatherization work performed, which will meet program standards.

**HOMEOWNERS**

NAME: Print: \_\_\_\_\_ Signature: \_\_\_\_\_

HOMEOWNER'S ADDRESS: \_\_\_\_\_

HOMEOWNERS PHONE #: \_\_\_\_\_ Date: \_\_\_\_\_

**Release of Billing Information:** I request that the Cleveland Electric Illuminating Company, Dominion Gas and the Cleveland Water Department release copies of my utility bills for the preceding 13 months and for the next 36 months to CHN. This information will be used to evaluate the CHN Housewarming Program.

**Energy Education:** My installer informed me of ways to reduce my energy costs for gas, electricity and water and how to purchase efficient appliances. (S)He also told me how to use my monthly bill to monitor gas and electricity use and make energy saving choices.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\* Qualified, professional contractors complete all work.**

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**NOTE TO THE HOMEOWNER: Inspector will determine if any of these actions apply to potential work to be performed at your property:**

- Lift exterior aluminum/vinyl siding in order to install wall insulation. There may be some minor bending of aluminum siding. Siding will be turned to as near original condition as possible.
- Install carbon monoxide detector near sleeping area.
- Test furnace and hot water tank for excessive carbon monoxide leaves. I understand the test results apply only for the day of the test.
- Install wall insulation from inside by drilling into the interior wall surfaces. All holes will be patched and made ready for painting. (Not done in homes with children under 6 years old.)
- Cut, lift or drill wood, wood shingle, asphalt or insulate brick siding. There may be some minor splitting or splintering of wood siding. Siding will be returned to as near original condition as possible.
- Downgrade fuses/breakers. Install appropriate sized fuses or breakers for a trial period of at least 7 consecutive days. Insulation cannot be installed in homes without the proper size circuit protection. **I understand that the fuses and breakers protect the wiring and that replacing a fuse or breaker with one of higher amperage than installed could be a fire hazard.**
- Install S-type fuses. I understand that these fuses can only be replaced with fuses of the same type and size.
- Property vent roof by installation of roof, gable or soffit vents
- Installment of attic insulation in floor.
- Lift Siding to install dense pack insulation in walls.



**SIZE OF HOUSEHOLD / TOTAL GROSS HOUSEHOLD**

1 up to 21,660	5 up to 51,580
2 up to 29,140	6 up to 59,060
3 up to 36,620	7 up to 66,540
4 up to 44,100	8 up to 74,020

For households with more than eight persons add \$5,400 per addition member

2999 PAYNE AVE, ROOM 306  
 CLEVELAND, OH 44114  
 Phone: 216-574-7100 ext. 114  
 Fax: 216-574-7130

**Tenants and homeowners who meet the income guidelines may apply for this program.**

An application for the Housewarming (Weatherization) Program is attached; **keep this page for your records.**

**Along with a completed application we need the following documents:**

**1. Proof of Income:**

Examples of proof of income include: **3** most recent check stubs, an award letter for benefits from Social Security or SSI, or most recent tax records, etc.. **\*\* IMPORANT: *PLEASE PROVIDE INCOME FOR EVERY ADULT IN THE HOUSEHOLD 18 YEARS OF AGE AND OLDER.*** (If no income, please provide a notarized letter)

**\*\* ALL PROOF OF INCOME MUST BE WITHIN THE LAST 12 MONTHS. \*\***

**2. Copy of Utility bills:**

**Current copy of your Dominion East Ohio gas bill and ELECTRIC bill. If Homeowner please provide WATER bill.**

**3. Homeowner authorization**

***ALL HOMEOWNER/LANDLORD AUTHORIZATION FORMS, NOTICES AND RELEASE OF CLAIMS MUST BE FILLED OUT COMPLETELY!***

**4. Proof of homeownership :( for Homeowners only)**

Examples of proof of homeownership include: a **copy** of a property tax statement, a **copy** of your deed or land contract, or a **copy** of your mortgage payment statement. **Please DO NOT SEND ORIGINAL DOCUMENTS**

**We look forward to helping you stay warm, and save energy.**

**Please mail (do not fax) completed Application along with all required documentation to:**

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**Agency: Cleveland Housing Network**

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**Contact: Verdale Brown**

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**Address: 2999 Payne Ave, Suite 306**

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**Phone: 216-574-7100 Ext. 114**

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**PLEASE KEEP THIS PAGE FOR YOUR RECORDS**

**2009-2010 WEATHERIZATION PROGRAM**  
**NOTICE TO CUSTOMERS**  
**(Landlord)**

DEAR CUSTOMER,

Dominion East Ohio has implemented a Weatherization Program with the assistance of the Cleveland Housing Network, Inc.(CHN). This program is designed for qualifying tenants and homeowners to help make their homes safe and more energy efficient, and to reduce energy costs.

All weatherization services will be provided by contractors of CHN. Dominion East Ohio will not be responsible for providing these services.

Before weatherization services can be provided, a trained and program-certified inspector under contract with CHN will visit the tenant's residence to determine what weatherization services are needed. The inspection may take several hours and the inspector must have clear access to the attic, crawl spaces and basement. The inspector will examine these specific areas:

1. All natural gas heating units, gas house lines, cook stoves, and hot water heaters will be examined to verify that they are operating safely and efficiently. The inspector is not responsible for inspecting any other gas-fired appliances.
2. The attic, sidewalls, floors, gas hot water tank, heating ducts and water pipes will be checked to determine any insulation needs.
3. A structural inspection will be conducted to determine the existence of any hazards, including moisture problems, which might affect or preclude the provision of weatherization assistance.
4. The inspector will conduct a test to determine whether the residence experiences air leakage. Additional tests may be conducted if the residence has a ducted forced air system.

**PLEASE TAKE NOTICE THAT IF THE INSPECTION REVEALS AN UNSAFE CONDITION, GAS SERVICE MAY BE DISCONTINUED UNTIL THE UNSAFE CONDITION IS CORRECTED.** Weatherization cannot be completed until all unsafe conditions are corrected.

After the inspection, the inspector will explain to the tenant the work that needs to be done, will complete paperwork, and will contact the contractor(s) that will be doing the work at the tenant's residence. The contractor(s) will then contact the tenant to schedule an appointment to complete the weatherization work.

Upon completion, the inspector will come back to the tenant's residence and make sure that the work was done correctly.

The Weatherization Program attempts to complete the service in about \_\_\_ to \_\_\_ weeks. However, the process may take longer.

If you have any questions about the Weatherization Program, please contact:

[CONTACT]

If your property and tenant qualify and you would like this service, please read and return the following items in the enclosed, self-addressed envelope:

1. A signed copy of this form.
2. A signed copy of the "Release of Claims" form included with this letter.

**I ACCEPT** the services provided by the Weatherization Program. I understand and accept that there may be costs associated with the Weatherization Program, which may include up to 50 percent of the cost of a furnace replacement and/or other health and safety work identified as necessary during the initial inspection before weatherization work can be undertaken. I agree to pay these costs in the form of a cashier's check, payable to Dominion East Ohio's designee,

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Name of Landlord (Please Print)

Phone (Include Area Code)

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Signature of Landlord

Date

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Address of Affected Rental Property (Residence Number, Street, City, State, Zip Code)

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Name of Qualifying Tenant

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Account Number

**2009-2010 WEATHERIZATION PROGRAM**  
**RELEASE OF CLAIMS**  
**(Landlord)**

I, the owner of the property at the address listed below, understand that the purpose of the Weatherization Program is to benefit qualifying tenants and homeowners through the application of energy conservation and weatherization measures. I understand that my tenants have applied to participate in the Weatherization Program, and hereby authorize the property at the address listed below to be weatherized as part of the program.

I also understand that an initial inspection is required to determine what weatherization measures are needed. I understand that this inspection shall be conducted by an inspector under contract with the Cleveland Housing Network, Inc. (CHN). I understand and agree if a furnace replacement is deemed necessary, 50 percent of the cost will be shared by the owner/landlord, unless the owner/landlord qualifies under the program..

**I UNDERSTAND AND ACCEPT THAT IF THE INSPECTION REVEALS AN UNSAFE CONDITION, GAS SERVICE MAY BE DISCONTINUED UNTIL THE UNSAFE CONDITION IS CORRECTED.** I agree that Dominion East Ohio and/or the inspector have sole discretion to determine whether an unsafe condition exists. I understand that weatherization cannot be completed until all unsafe conditions are corrected.

In consideration of the receipt of an initial inspection, and the receipt and installation of weatherization materials, I hereby release, acquit and forever discharge Dominion East Ohio and its officers, agents, affiliates, employees, successors and assigns, of and from any and all actions, causes of action, including by way of illustration but not by limitation, claims, demands, damages, costs, loss of services, expenses and compensation, which I now or may hereafter have, or that my heirs, executors or their administrators can or may have against Dominion East Ohio or their officers, agents, affiliates, employees, successors and assigns, on account of, or in any way relating to, the initial inspection and weatherization materials provided, as well as the installation and use thereof.

I understand and acknowledge that the CHN and its contractors are providing and installing all weatherization materials, and that no weatherization services or materials will be provided by Dominion East Ohio. I further understand that all weatherization materials will be provided on an “AS IS” basis, and that Dominion East Ohio **DISCLAIMS ALL WARRANTIES, IMPLIED OR EXPRESSED, INCLUDING ANY WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT TO SUCH GOODS, THEIR INSTALLATION, OR THE RESULTS OF THEIR INSTALLATION.** I also acknowledge that any energy savings projected as a result of the installation of weatherization materials are only an estimate.

I authorize Dominion East Ohio to release to its designees information about my account and about weatherization materials installed on the property at the address below.

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Signature of Landlord

Date

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Address of Affected Rental Property (Residence Number, Street, City, State, Zip Code)

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Name of Qualifying Tenant

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Account Number