



Please mail completed form to:
 project: HOMES
 Weatherization Program
 88 Carnation Street
 Richmond, VA 23225

Weatherization Program – Preliminary Application

Name of Head of Household: _____
 Address: _____ City/County _____ Zip Code _____
 Phone: _____
 Email: _____

Name of person on deed to house/title of mobile home (if different): _____
 Phone (if different): _____

Do you rent your home or mobile home? ___ Yes ___ No
 If yes, please provide name and phone number of current owner(s):

What year was your home built? _____
 To your knowledge, has your home ever been weatherized? ___ Yes ___ No

Electric Utility Provider: A&N Electric Southside Electric Rappahannock Electric
 Community Electric Dominion Energy Other _____

Gas Utility Provider: Virginia Natural Gas Columbia Gas City of Richmond

Complete the following for ALL household members (including head of household):

Name	Date of Birth (MM/DD/YY)	Race* <i>See below</i>	Sex (M/F)	Disabled (Y/N)	Veteran (Y/N)	Gross Monthly Income & Source
						\$
						\$
						\$
						\$
						\$
						\$
						\$

Total Gross Monthly Income: \$ _____

* White (W), Black or African American (B), Asian (A), Mixed, two or more races (M), Native American (N), Hispanic/Latino (H), Other (O)*

In order to process your application, copies of the following items are required:

- Deed of trust or tax records (home) or certificate of title (mobile home) showing homeownership.
- Income verification of all household members (social security letter; SSI letter; paystubs; recent tax return; or 3 months of bank statements showing deposits from social security, SSI, or work pay).
 - Anyone 18 years or older without income coming into the home will need a notarized letter confirming their unemployment status
- Past 3 months of all utility bills showing how much energy your home currently uses (electric, gas, oil, propane).

(Please TURN OVER to BACK PAGE)

Please complete the following to help us prioritize your request:

Please circle which county/city you live in:

Accomack	Amelia	Buckingham	Charles City	Chesterfield
Colonial Heights	Cumberland	Dinwiddie	Emporia	Franklin
Goochland	Greensville	Hampton	Hanover	Henrico
Hopewell	Isle of Wight	James City	New Kent	Newport News
Northampton	Petersburg	Poquoson	Powhatan	Prince Edward
Prince George	Richmond	Spotsylvania	Suffolk	Surry
Sussex	Williamsburg	York		

Do you have pets inside? Yes No What kind & how many: _____

Type of home (please check one):

____ One-Story ____ Two-Story ____ Tri-Level ____ Townhome ____ Mobile Home (singlewide)
____ Doublewide Mobile Home ____ Other, explain: _____

Is your heat currently working? Yes No

Type of heat (please check one):

____ Natural Gas ____ Oil ____ Heat Pump ____ Electric Baseboard ____ Propane
____ Wood Stove

Do you have gas /propane/ or oil to run your heating system? Yes No

Hot Water Heater: Electric Gas

Gas Stove: Yes No

Type of home exterior (please check all that apply):

____ Brick ____ Stone ____ Stucco ____ Wood ____ Log ____ Vinyl Siding ____ Aluminum/Metal Siding
____ Asbestos Tile Siding ____ Other Exterior, explain: _____

Please indicate if any of the following are present in your home:

Deteriorating roof system	____ Yes	____ No	____ Not Sure
Minor roof leaks	____ Yes	____ No	____ Not Sure
Plumbing leaks	____ Yes	____ No	____ Not Sure
Sewer leaks	____ Yes	____ No	____ Not Sure
Septic issues	____ Yes	____ No	____ Not Sure
Holes in ceilings	____ Yes	____ No	____ Not Sure
Holes in walls	____ Yes	____ No	____ Not Sure
Electrical problems	____ Yes	____ No	____ Not Sure
Active knob and tube wiring	____ Yes	____ No	____ Not Sure
Asbestos wrapped pipes	____ Yes	____ No	____ Not Sure
Lead paint in/on structure	____ Yes	____ No	____ Not Sure
Attic space	____ Yes	____ No	____ Not Sure
Crawl space	____ Yes	____ No	____ Not Sure
Existing attic insulation	____ Yes	____ No	____ Not Sure
Existing wall insulation	____ Yes	____ No	____ Not Sure
Knee walls	____ Yes	____ No	____ Not Sure
Existing bathroom fan	____ Yes	____ No	____ Not Sure
Windows with cracked glass	____ Yes	____ No	____ Not Sure
Storm windows with cracked glass	____ Yes	____ No	____ Not Sure

Additional: Notes: _____ _____ _____ _____ _____ _____ _____ _____
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My signature below certifies that the information contained on this 2-page Preliminary Application is accurate to the best of my knowledge.

X

Signature of Applicant

Date