

**APPLICATION FOR WEATHERIZATION ASSISTANCE
HIGHLAND RIM ECONOMIC CORPORATION**

PART 1 – APPLICANT INFORMATION (PLEASE PRINT):

Applicant's Name _____ Phone # _____
 Applicant's Address _____
 City/State/Zip _____ County _____

PART 2 – HOUSING INFORMATION (PLEASE CHECK AS APPROPRIATE):

Type of Structure: Own Buying Rent Public Housing Other
 Private Multi-Unit Single Family Unit Split Level Mobile Home
 One Story Two Story Three Story
 Exterior Type: Wood/Masonite Aluminum/Steel/Vinyl Stucco Brick/Stone Other
 If you are a renter, please provide the following landlord information:
 Landlord's Name _____ Phone # _____
 Landlord's Address _____ City/State/Zip _____

PART 3 – INCOME ELIGIBILITY

Does any household member receive Food Stamps? Supplemental Security Income (SSI)?
 AFDC/Families First?

Name	Birthday	Age	Sex	Race	Soc. Sec. #	Disabled Y or N	Income Per Month

Total Monthly Income: _____ Total Annual Income: _____
 Are you interested in the Home Repair/Improvement Program? Yes No

PART 4 – APPLICANT CERTIFICATION STATEMENT

I certify that all of the information provided in this application for Weatherization Assistance is true and correct. I understand that any one who fraudulently covers up a material fact or who knowingly gives false information for the receipt of Weatherization Assistance is liable upon conviction to a fine of \$10,000.00 or imprisonment for not more than five years, or both. I authorize the verification of any and all information provided herein to determine my eligibility, and acknowledge that I have been informed of my appeal rights. I understand that I will be notified in writing of my eligibility status.

Applicant's Signature _____ Date _____

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Are there any known plans for the government acquisition or clearance of dwelling unit: Yes No
 (if yes, the Department of Human Services is to be notified before any action is taken on the application.)
 Categorical Eligibility: Yes No
 Application Status: Approved Denied Priority Points _____

Signature of Determining Official _____ Date _____