

SAVE MONEY ON YOUR UTILITY BILLS!

Thank you for your interest in **free** weatherization services from Longs Peak Energy Conservation. If you and your home qualify, you will get a **free** energy audit, furnace check, and carbon monoxide testing. You **may**

then receive attic and/or wall insulation, furnace repairs or replacement, and/or refrigerator replacement. Each home may only receive this level of service *once*. We are able to weatherize single-family homes, mobile homes, and multi-family units up to a four-plex that are either owner-occupied homes or rental properties.

You can income qualify for these services by one of the following ways:

1. Receiving benefits from: LEAP, TANF, OAP, AND, or SSI (Supplemental Security Income), SNAP, SSDI

2. LOW INCOME

Send a copy of <u>all</u> household members' last paycheck stubs showing your year-to-date gross income, for at least 3 months. Qualifying income limits are:

Household Size	2017 Total Gross Household Income	
1	\$24,120	
2	\$32,480	To request proof of benefits letter from Social
3	\$40,840	Security to use as proof of your gross income,
4	\$49,200	call:
	(add aprox \$8360 for each	In Boulder County: (800) 772-1213
	additional member)	In Larimer County: 1-866-336-7385
	*Income levels change annually	·

If you are self-employed or have no income please call us for the necessary forms.

To Apply for Weatherization Services, Please Provide the Following Required Documentation:	Longs Peak Energy Conservation PO Box 471
□ Completed Weatherization Application	Boulder, CO 80306
 □ Legal Residency Affidavit □ Copy of a Valid Photo ID □ Homeowner or Landlord Permission Form □ Consent to Disclose Utility Customer Data Form □ Copy of recent Xcel Energy Bill, if applicable 	Phone: (720) 864-6401 Fax: (720) 864-6419 www.longspeakenergy.org
 □ Approval Letter for LEAP, TANF, SSI, Snap etc. Or □ Proof of Income for <u>All</u> Household Members 	



:AHORRE DINERO EN SUS PAGOS DE UTILIDADES!

Si usted y su casa califican para el programa de climitización, pueden recibir una auditoria de sus aparatos domesticos en su casa como el sistema de calefacción, sistema de insulación, y realizer

pruebas para detectar el gas monóxido de carbono y otros escapes de gas. Es **posible** que puede recibir nueva insulación, y/o systema de califación.

Puede vivir en una casa, hogar rodante o condominio. No importa si usted renta o es dueño de su hogar. Este servicio es **GRATIS** para personas que califican.

ELIJA UNA DE LAS FORMAS PARA TENER DERECHO A ESTE SERVICIO:

- 1. □Recibe usted LEAP, TANF, SSI (Supplemental Security Income), OAP, o AND, SNAP, SSDI
- 2. □Bajos Ingresos

Si usted trabajó los doce meses pasados, envíenos una copia del talón del último cheque de todos los que trabajan.

Número de persona!

en su casa	2017 Ingreso
1	\$24,120
2	\$32,480
3	\$40,840
4	\$49,200
	(añada aprox \$8360 por
	cada miembro adicional)
	*Limites de ingreso cambian
	anualmente

Si su único ingreso proviene del Seguro Social o SSDI, llame a la oficina del Seguro Social en Boulder (800) 772-1213. En Larimer, llame a 1-866-336-7385. Para conseguir pruebas de su ingreso mensual.

Para Aplicar para el Programa de Climit	<u>ización,</u>
Por favor entrege estos Documentos Nec	esarios:

Ш	Aplicación comple	ta de	Climitización
	Forma de Pesiden	cia La	اده

☐ Fotocopia de ID valido con foto

☐ Forma del permiso para Dueño del Hogar

☐ Forma de permiso de recibir información de XCEL

☐ Copia de Factura de XCEL Energy

☐ Comprobante de LEAP, TANF, SSI, SNAP etc.

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Comprobante de Ingresso de todos en la casa

Longs Peak Energy Conservation PO Box 471 Boulder, CO 80306

Phone: (720) 864-6401 Fax: (720) 864-6419

Tax. (720) 604-0419

www.longspeakenergy.org



Date Approved: January 2017

Weatherization Application

Please Return Application to: Longs Peak Energy Conservation (LPEC) P.O. Box 471 Boulder, CO 80306 Email:lpec@bouldercounty.org, Subject:Weatherization

Notice: Homes that received Weatherization services after September 30, 1994 are not eligible to apply.

Applicant Information (Please P	rint)				
Last Name:		F	irst Name:		Middle Initial:
Street Address: (location of home)				Ü	nit # or Manufactured Lot #
City:			County:		Zip:
Primary Phone:			Secondary Phone:		Other Phone:
E-Mail:					
Mailing Address - If different from street	t address		City:		Zip:
Utility Information					
Natural Gas or Propane Provider				Account #:	
Electric Provider:				Account #:	
Qualification Information					
Option 1: Qualify through Publ	ic Assis	tance:		116	
If you currently receive any of the not necessary. However, you mu	ne follov et subm	wing forms of publ	ic assistance, you pletter with this ar	pre-quality and ve	erification of income is all that apply:
The necessary. However, you ma	JC JUDIN	iic a valia approvat	teted With the sp	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
☐ TANF ☐ AND ☐ OAP ☐ S	SI 🗆 S	SSDI 🗆 SNAP 🗆	LEAP		
<u>OR</u>					
Option 2: Qualify through House	ehold li	ncome Verification	n:		
List all household income below	and sub	mit pay stubs or o	ther verification fo	or each income so	urce for the past 3
months. Income documentation	must be	e included for each	household membe	er with an income	. Income is defined as
money received from the followi	_			□ Spo	usal Support (alimony)
☐ Job income ☐ Social Secu	-		•	· ·	
☐ Workers' Compensation		□ Unemployment	□ Sett-empte	byment 🗀 oth	
Household Information (please li	ist all p	eople living in you	r household; attacl	h additional sheet	if necessary)
Name	Age	Has a Disability?	Native American?	Gross Monthly Income*	Income Source(s)*

*Gross Monthly Income and Income Source columns are only required if applicant is qualified for Weatherization via Option 2: Household Income Verification, as stated above.



Lawful Presence Affidavit

I, Colorad	, swear or affirm under penalty of perjury under the laws of the State of o that: (check one)
-	I am a United States citizen, or
	I am a Permanent Resident of the United States, or
	I am lawfully present in the United States pursuant to Federal law.
law req further punisha	stand that this sworn statement is required by law because I have applied for a public benefit. I understand that state uires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is ble under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and constitute a separate criminal offense each time a public benefit is fraudulently received.
Applica	nt SignatureDate

Applicant must send a copy of current picture identification with application. Acceptable forms of identification include:

- A valid Colorado driver's license or a valid Colorado identification card
- A valid United States military card/Common Access Card
- A valid United States Coast Guard Merchant Mariner card
- A Native American tribal document
- A valid United States passport
- If you do not possess any of the above documents, your local Weatherization agency can provide you with a list of additional documents which are accepted for verifying lawful presence.



Description of Home			
Do you own or rent your home? Own Rent* ref you rent your home, your landlord must complete the permission form on page 4.			
Type of home: House (select one type): □Ranch style (one level) □Bi-Level □Tri-level □House divided into 2 units □Duplex Manufactured Home (select one type): □ Singlewide □ Doublewide Other (select one type): □ Townhouse □ Apartment □ Condo □ Multiplex □Cabin □ Modular			
Home features: ☐ Finished basement ☐ Unfinished basement ☐ Crawlspace ☐ Pitched roof ☐ Flat roof ☐ Has an Addition ☐ In a Manufactured Home Park			
What year was the home built? How long have you lived in the home?			
Heating System: (check all that apply) Type: □ Forced Air □ Boiler □ Electric Baseboard □ Fireplace/Stove □ Wall Furnace □ Space Heater □ Floor/Gravity □ No furnace □ Other: Fuel: □ Natural Gas □ Propane □ Electricity □ Wood □ Other: Location: □ Basement □ Attic □ Crawlspace □ Wall □ Floor □ Other:			
Cooling System: (check all that apply) □ Central Air □ Window A/C □ Swamp Cooler □ None			
Exterior: (check all that apply)			
Appliances: Hot Water Heater Type: □ Natural Gas □ Propane □ Electric □ Solar Cooking Appliance Type: □ Natural Gas □ Propane □ Electric □ Combination			
Additional Home Details: Is the home for sale or likely to be put up for sale in the near future? ☐ Yes ☐ No Are you currently remodeling or doing construction on any part of your home? ☐ Yes ☐ No If yes, please list: Does your home have broadband internet? ☐ Yes ☐ No Is anyone in the household on oxygen? ☐ Yes ☐ No Does anyone in the household have allergies or hyper-senstivities to dust, fiberglass, cellulose, mold, latex, or common building materials? ☐ Yes ☐ No If yes, please list:			
Home Access Authorization			
Access to your home: Do you agree to and understand that Colorado weatherization technicians and contractors must be given access to all rooms in your home during business hours and on a reasonable schedule for any work to proceed? Please note that a State Quality Assurance Inspector may also return within one year of work completion to inspect the work, including all safety and diagnostic testing.			
Permission to photograph home: Do you agree to allow Colorado weatherization technicians and contractors and its designees to photograph the unit for pre and post-work documentation?			
Before weatherization work can begin, the home must meet a minimum standard of housekeeping . Do you agree to and understand that work areas (specifically areas around heating systems, attic and crawlspace accesses and exterior doors and windows) are to be free of debris, clutter, and pets and be reasonably hygienic where work is to be completed?			
☐ I agree ☐ All of the members of my household have a disability that prevents agreement.* *Reasonable accommodations may be made for households with disabilities.			
Applicant SignatureDate			



To the LANDLORD or PROPERTY MANAGER:
Unit Address:Applicant Name:
Your tenant is applying for weatherization services provided by the Colorado Energy Office Weatherization Assistance Program (CEO Wx). If the application is approved, they will be eligible to receive free energy efficiency services that will help them save money on their energy bills and make their unit more comfortable and safe. Weatherization services includes an energy audit and safety diagnostics of the home. The energy audit will determine what energy savings measures can be provided to the tenant at no charge. These <u>free</u> measures may include additional attic insulation, wall insulation, crawlspace/floor insulation, air sealing, storm windows, ventilation, and furnace or hot water heater repairs. In multifamily housing (between 2-4 units), if the energy audit reveals the need for heating system replacement or identifies a highly inefficient refrigerator, the program will seek matching funds from you, the landlord. Because this program is federally-funded and focused on serving low-income households, the typical cost to the landlord for replacement of heating systems or refrigerators is significantly less than 50% of market rate. In these cases you will be presented with all options before moving forward.
Additionally, in order to provide the maximum improvement in comfort, energy savings, and safety, the CEO Wx assesses all areas of the home that could be improved. In some cases, making these improvements to the home can be moderately invasive. For instance, if the walls of the home lack adequate insulation, the weatherization crew may be able to retrofit the walls with insulation, which would require drilling holes through the interior or exterior wall surface. Once insulation is installed, the holes are plugged and patched with spackle or drywall compound as close to the original texture as possible. In some cases the patch may remain somewhat visible. While every effort will be made to blend the patches, extensive drywall repair, wallpapering, or custom texturing cannot be provided. Examples of other measures that may be moderately invasive include ceiling insulation, furnace replacement, and air sealing. Similar to wall insulation, these measures may involve cutting into interior or exterior wall surfaces and may leave behind visual evidence of such.
The goal of the CEO Wx is to provide maximum improvements to comfort, energy savings, and safety. 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 the CEO Wx serving my property.
I have concerns about heating system or refrigerator repair or replacement.
I give my consent, but have concerns about:
☐ I do not give my consent for the CEO Wx to serve my property.
The refrigerator in the property is owned by the: \Box Tenant \Box Landlord
I have read and understand the terms and conditions presented herein, and except for the conditions above, grant permission to perform such weatherization measures as may be suited to this property under the CEO Wx standards. I also certify that the property is not presently for sale, nor is it designated for acquisition or clearance (foreclosure) by a federal, state, or local program. In addition, I agree that rent shall not be raised due solely to the increased value weatherization provides to the dwelling unit. I hereby release and pledge to defend and indemnify CEO Wx, its employees, agents, and independent contractors involved from any liability or loss in connection with the performance of weatherization assistance or any act or eventuality arising from this work.
Landlord Name and Landlord Mailing Address
Landlord Primary Phone # Landlord Other Phone # Landlord Email Address
Landlord Signature and Date



To the HOMEOWNER / TENANT:

In order to provide the maximum improvement in comfort, energy savings, and safety, the Colorado Energy Office Weatherization Program (CEO Wx) assesses all areas of your home that could be improved. In some cases, making these improvements to your home can be moderately invasive. For instance, if the walls of your home lack adequate insulation, the weatherization crew may be able to retrofit the walls with insulation, which would require drilling holes through the interior or exterior wall surface. Once insulation is installed, the holes are plugged and patched with spackle or drywall compound as close to the original texture as possible. In some cases, the patch may remain somewhat visible. While every effort will be made to blend the patches, extensive drywall repair, wallpapering, or custom texturing cannot be provided.

Other comfort, energy-saving, and safety measures that may be moderately invasive include ceiling insulation, furnace replacement, and air sealing. Similar to wall insulation, these measures may involve cutting into interior or exterior wall surfaces and may leave behind visual evidence of such.

The goal of the CEO Wx is to provide maximum improvements to comfort, energy savings, and safety. 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 home, please indicate below and discuss these concerns with the energy auditor*: I have no concerns about the Weatherization Program serving my home. I have concerns about wall insulation. I have concerns about ceiling or attic insulation. I have concerns about: ____ I have read and understand the terms and conditions presented herein, and except for the conditions above, grant permission to perform such weatherization measures as may be suited to this property under the CEO Wx standards. I also certify that the home to be weatherized is not presently for sale, nor is it designated for acquisition or clearance (foreclosure) by a federal, state, or local program. I hereby release and pledge to defend and indemnify CEO Wx, its employees, agents, and independent contractors involved from any liability or loss in connection with the performance of weatherization assistance or any act or eventuality arising from this work. Date_ Applicant Signature___

*For Tenants: Permission granted by the Landlord represents final decision related to weatherization concerns.

Client complaints regarding the accrual of benefits as a result rent raised solely due to the increased value weatherization provides to the dwelling unit should be directed to 303-866-2100.



Please Return Application to: Longs Peak Energy Conservation (LPEC) P.O. Box 471 Boulder, CO 80306 Email:lpec@bouldercounty.org, Subject:Weatherization

Please Read This Section Carefully:

My signature below authorizes Colorado weatherization staff and crew to enter my home as needed to perform weatherization work. My signature verifies this residence is not currently for sale, nor is it designated for acquisition or clearance (foreclosure) by federal, state or local programs. Upon completion of work, I give permission for the contractor, sub-contractor staff, local, state, and federal officials to inspect said work. I understand the warranty is one year of workmanship with materials being covered by manufacturers' warranties only. My signature below authorizes the Colorado Energy Office Weatherization Program (CEO Wx) and its designees to inspect heating, fuel usage and utility billing records for up to five years before and after completion of weatherization work and authorize pertinent utility and fuel companies to make such records available to them solely for obtaining data for evaluation of subsequent energy conservation effectiveness.

I agree, on behalf and for all who stand in my stead, that the CEO, its subgrantees and weatherization crews will not be held liable for any injury or expense incurred by me while participating in this program. I attest to the best of my knowledge that the information on this form is correct and complete. This service is free of charge but if my home is served due to incomplete or incorrect information that would otherwise make my household ineligible, I accept responsibility for paying for services received. I authorize the release of income and benefits information to the CEO Wx to document my eligibility. Pursuant to 5 U.S.C. 552(b)(6), of the Freedom of Information Act, the CEO Wx 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 the CEO may, however, release information about recipients in the aggregate in a manner which does not identify specific individuals.

Appeal Process: Once you have completed the application, you have the right for your application to be processed within 30 days. If your application is not processed within 30 days or if you are denied services, you may appeal the decision using the following appeals procedure: You may appeal to the Program Manager or Executive Director of the local weatherization agency. The Program Manager or Executive Director will issue a decision in a written letter within 15 days receipt of the notice of appeal. If the Program Manager or Executive Director denies services and you still are in disagreement, you have 15 days after receiving the written notification by the Program Manager or Executive Director to appeal to the Colorado Energy Office Weatherization Program (CEO Wx). Appeals to the CEO Wx should be in writing and addressed to: Colorado Energy Office Weatherization Program, 1580 Logan Street, Suite 100, Denver, CO 80203. The CEO Wx will have 15 days to respond in writing to all appeals and the decision will be considered final. My signature below indicates that I have read, understood and agree to the conditions of this application.

	pplicant Signature			Date		
ow did you hear about the we	atherization program	? (check all that apply)	14			
LEAP	Utility Compa		Newspaper			
Social Services Office	Brochure		Television			
Heat Help Line	Friend/ Family Member		Radio			
2-1-1	Bus ad/Billbo	ard	Other:			
o Not Write Below - For Of						
certify that this client is el	igible under the app	propriate funding guid	elines.			
certify that this client is ellow unit WAS weatherized in			elines. NOT been previousl	y Weatherized		
				y Weatherized HHN or Qualifying Program		





CONSENT TO DISCLOSE UTILITY CUSTOMER DATA CO

All requested information must be provided for the constant language, please contact inquire@xcelenergy.com. Para servicios públicos.		
Utility Name and Contact: Xcel Energy Correspond	ence Department	
Physical and Mailing Address: P.O. Box 8, Eau Clai	re, WI, 54702	
Phone: 1-800-895-4999 Email:		Fax: 1-866-208-8732
For additional information, including the utility's privacy p		
By signing this form, you allow your utility to give the follo		
Organization/Trade Name: Longs Peak Energy	Conservation	
Contact Name (if available):		
Physical and Mailing Address: 1288 Alaska Ave	nue, Longmont, CO 80501	
Phone: 720-864-6401 Email:	chatch@bouldercounty.org	Fax:
This organization will receive the following customer data	a:	
Information from your meter collected by your ut	ility services provider from the following servic	es (check all services that apply):
Information regarding your participation in renew energy efficiency or other utility programs	vable energy, demand-side management, load	management,
Other (specify)		
This information will be used to:		
Provide you with products or services you reque	sted Offer you products or services	s that may be of interest to you
🗵 Determine your eligibility for an energy program	🔀 Analyze your energy usage	
Other (specify)		
DATA COLLECTION PERIOD		
The relevant timeframe associated with the requested dat	a is from $\frac{01}{\sqrt{01}}$ $\frac{1}{\sqrt{2010}}$ and will:	
end on/		
🔀 be effective until terminated by you.		
You may terminate this consent at any time by sending a w	vritten request with your name and service ad	dress to your utility.
PLEASE READ THE CU	STOMER DISCLOSURES ON PAGE 2 OF THIS FO	DRM
By signing this form you acknowledge and agree that you a provider to disclose your customer data as specified in this		that you authorize your utility service
CUSTOMER ACCOUNT NUMBER		
ભારુક Addres મુખીયું, ઉપક્રાંક, સિં _દ Code		
SERVICE ADDRESS	PRINTED NAME	
SIGNATURE OF CUSTOMER OF RECORD	DATE SIGNED	

CUSTOMER DISCLOSURES

- ***Customer data can provide insight into activities within the premises receiving utility service. Your utility may not disclose your customer data except (1) if you authorize the disclosure, (2) to contracted agents that perform services on behalf of the utility, or (3) as otherwise permitted or required by laws or regulations.***
- ***You are not required to authorize the disclosure of your customer data. Not authorizing disclosure will not affect your utility services.***
- ***You may access your standard customer data from your utility without any additional charge.***
- ***Your utility will have no control over the data disclosed pursuant to this consent, and will not be responsible for monitoring or taking any steps to ensure that the data recipient maintains the confidentiality of the data or uses the data as authorized by you.***
- ***In addition to the customer data described above, the data recipient may also receive the following from your utility: your name; account number; service number; meter number; utility type; service address; premise number; premise description; meter read date(s); number of days in the billing period; utility invoice date; base rate bill amount; other charges including base rate and non-base rate adjustments; taxes; and invoice total amount. Your utility will not provide your Social Security Number or any financial account number to the data recipient.***



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