

WEATHERIZATION DEPARTMENT

Application Instructions - Answer all the questions on the application and return with copies of everything listed below that applies to you and your family. Check the boxes as you work through the application and gather documents. Income eligibility guidelines are listed on the next page.



Proof of Income:.....
 Provide proof of income for ALL household members for the three months BEFORE the month you sign the application. Include any of the following that apply to you or any household member.

- Wages (paychecks or cash)
- Social Security (SSI and SSDI) award letter showing current benefit amount
- Unemployment
- Temporary Assistance for Needy Families (TANF)
- Retirement and/or Pension

NOTE: Bank statements are not acceptable as proof of income



Zero Income
 • Anyone in the home who is over 19 (20 and up) *with no income* MUST complete a Zero Income Form (request form from CMCA Weatherization Program or download from www.cmca.us)
 • If NONE of the household members have any income, the form must be signed by a notary



Proof of Site-Built Home Ownership (choose one) -----
 • Paid real estate taxes from previous year
 • Current home owner's insurance
 • Deed filed with county of residence (with physical address)
 • Monthly bill from mortgage company

OR



Proof of Mobile Home Ownership (choose one) -----
 • Paid personal property tax from previous year listing mobile home
 • Current homeowner's insurance
 • Clear title in applicant's name
 • Monthly bill from mortgage company

OR



Proof of Renting -----
 • Provide landlord's name, address, and phone number
 • CMCA must contact your landlord for permission to weatherize the home



Utility Bill (provide both if applicable)
 • Electric bill with account number and service address
 • Heating fuel bill (gas, propane, etc.) with account number and service address



Social Security Card
 For the person at the top of the Program Application

Conflict of Interest Form.....
 Complete this form so we are aware of your relationship to CMCA

If you have any questions about applying for weatherization, please call: 573-443-3500, or email us at wx@cmca.us. Please submit all information listed above with your Program Application.

Completed Program Application with the required documents can be mailed or dropped off at the address above.



Income Eligibility Guidelines for Weatherization

Household	
Members	Maximum Income
1	\$25,760.00
2	\$34,840.00
3	\$43,920.00
4	\$53,000.00
5	\$62,080.00
6	\$71,160.00
7	\$80,240.00
8	\$89,320.00

NOTES:

To determine eligibility when a household has more than eight members, add an additional \$9,080.00 for each member.

This chart is showing 200% of the Federal Poverty Limits for 2021



Missouri Low Income Weatherization Assistance Program Application

CENTRAL MISSOURI COMMUNITY ACTION
 800 N. Providence Rd., Suite 104
 Columbia, Missouri 65203

FOR OFFICE USE ONLY	
COUNTY	
JOB NUMBER	

Answer every question on the application and provide the proper supporting documentation. Leaving questions blank on the application or failing to provide proper documentation will cause delays.

APPLICANT INFORMATION

NAME		PHONE NUMBER WITH AREA CODE
ADDRESS	CITY STATE	ZIP CODE
HAS THE HOME PREVIOUSLY BEEN WEATHERIZED? <input type="checkbox"/> No <input type="checkbox"/> Yes Date:	SSN	EMAIL

HOUSEHOLD INFORMATION

TYPE OF HOME <input type="checkbox"/> House <input type="checkbox"/> Mobile Home <input type="checkbox"/> Shelter <input type="checkbox"/> Multi-family		ESTIMATED AGE OF HOME	REFERRED BY
If you own your home, please provide proof of home ownership. (deed, mortgage, title, etc.) If you rent your home, provide your landlord's address, telephone number and fax number.			
Own <input type="checkbox"/>			
Rent <input type="checkbox"/>			

Household Members	TOTAL HOUSEHOLD MEMBERS	CHILDREN 19 AND UNDER	OVER 60	DISABLED	NATIVE AMERICAN
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List all household members. If additional space is needed, please attach list.

Household Member Name	Date of Birth	Native American	Handicap or Disabled	Veteran
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Provide proof of income for the previous three months for all household members. If additional space is needed, please attach list.

INCOME INFORMATION

Income Source	Amount	Interval

FUEL CONSUMPTION INFORMATION

PRIMARY FUEL TYPE	
PRIMARY FUEL SUPPLIER	ACCOUNT NUMBER
PRIMARY ELECTRIC SUPPLIER	ACCOUNT NUMBER

TERMS AND CONDITIONS

I hereby apply for weatherization assistance through the Low-Income Weatherization Assistance Program, or LIWAP, administered by Missouri Department of Natural Resources' Division of Energy and implemented by the weatherization agency with whom I am filing this application. I authorize and direct any federal, state or local agency, organization, business or individual to release to the weatherization agency any information needed to verify my application for weatherization assistance. I further authorize and direct the weatherization agency to release information to other entities for the purpose of determining my household's eligibility for the LIWAP.

I authorize the release of my billing and utility consumption history from my utility vendors providing service to the residence for which I request weatherization assistance, and those vendors are hereby released from any liability for providing information to the weatherization agency.

I understand information relating to my eligibility application or participation in the program, such as name, address, or income information, are generally exempt from disclosure and requests for such information will be treated by the Department of Natural Resources' Division of Energy consistent with the federal government's treatment of information requested under the Freedom of Information Act (FOIA), 5 U.S.C. 552, including the privacy protections contained in Exemption (b)(6) of the FOIA. A request for release of my personal information including but not limited to my name, address, or income information requires the Department of Natural Resources' Division of Energy to balance a clearly defined public interest in obtaining this information against my legitimate expectation of privacy. If a legitimate, articulated public interest is found, the Department of Natural Resources' Division of Energy may release my information in the aggregate with other recipients' information.

I understand that funds for weatherization assistance for my residence may be provided by federal and state agencies, utility vendors, and other sources, and I hereby agree that my information, to the extent not specifically required to be kept confidential pursuant to the federal Privacy Act and Freedom of Information Act, and Missouri laws including the Sunshine Law, may be released by the Department of Natural Resources' Division of Energy to qualified personnel for research, audits, program evaluation or reports, with appropriate restrictions on the use of that information (i.e., not to be released to the public). If I receive LIWAP services, I specifically authorize the Department of Natural Resources' Division of Energy to release information regarding my identity, address, weatherization services performed on my residence and other pertinent information, to my utility vendors or other appropriate entities for use in analyzing the effects of weatherization on utility usage, for other research, or for required reporting purposes. This authorization does not constitute public release of my identity, and I understand the Department of Natural Resources' Division of Energy will not publicly release or permit public release of my personnel information, and will place appropriate restrictions on use of my personal information. Highly sensitive information such as Social Security numbers, income or medical information will be protected from disclosure under the Privacy Act and Freedom of Information Act, as well as the Missouri Sunshine Law.

Civil Rights Statement:

No person will be denied or discriminated against in connection with any program or activity receiving federal financial assistance from the U.S. Department of Energy because of race, color, national origin, age, sex or disability.

Access to Residence/Conditions:

I agree and understand the Department of Natural Resources' Division of Energy staff, weatherization technicians and contractors must be given access to all areas of my home during business hours and on a reasonable schedule.

My signature below authorizes the Department of Natural Resources' Division of Energy employees, the weatherization agency employees, contractors and subcontractors to enter my home as needed to perform energy audits, weatherization work and inspections of weatherization work and such persons will not be held liable for any injury or expense incurred by me while participating in this program.

I agree and understand that if my home is deemed unsafe or unacceptable for weatherization technicians, contractors or inspectors to perform their duties due to unsafe or dangerous conditions, presence of debris, clutter, mold, insect/rodent infestation, pets, threat of violence, etc., the project will be postponed until these conditions are corrected.

I agree to allow my home to be photographed for pre-and post-work documentation.

I understand that in order to weatherize my home, holes may be drilled in walls (particularly outside walls) to install insulation. I understand holes will be plugged as part of the weatherization service, but that it is my responsibility to paint the plugs used to fill these holes. I also understand that older vinyl or other siding may be damaged during this process.

Closing Certification:

My signature verifies this residence is not currently for sale, nor is it designated for acquisition, clearance or foreclosure by federal state or local programs, and has not been weatherized previously (unless work was performed prior to Sept. 30, 1994). Upon completion of work, I give permission for the contractor, subcontractor, the weatherization agency employees, the Department of Natural Resources' Division of Energy employees and federal officials to inspect that work.

I certify the information provided in this application is true, correct and complete to the best of my knowledge. I understand that I may be fined, imprisoned or both under state or federal law if I make false statements on this application in order to get benefits I am not eligible to receive. LIWAP service is free of charge, but I understand that 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.

My signature below indicates that I have read, understood and agree to the conditions of this application.

Applicant's Signature: _____ Date: _____



800 N. Providence, Suite 104
Columbia, MO 65203
573-443-8706
WWW.CMCA.US

WEATHERIZATION DEPARTMENT

Conflict of Interest Form

To ensure that Central Missouri Community Action (CMCA) is being fair and is not showing favoritism when considering your application, we need you to please answer the following questions. Checking YES to these questions does not make you ineligible for receiving services. But it is necessary for us to know and to get approval in your circumstance. Check or circle YES or NO to clearly identify your answer for each question.

Are you a CMCA employee?

YES NO

Are you a CMCA board member?

YES NO

Are you a CMCA weatherization contractor?

YES NO

Do you have a relative that is a CMCA employee, board member or a weatherization contractor?

YES NO

If you circled yes to this last question, please write their name and relationship.

Thank you for your cooperation.

Print your Name here

Today's Date

Sign here



Client Confidentiality Agreement / Release of Information

Household Comments:

Individual Comments:

I certify that the information on this application is true and accurate to the best of my knowledge and belief. I understand that such information is subject to verification and I further realize that falsified or fraudulent information may result in the rejection of this application.

Under the terms of this Agreement, CLIENT agrees to release to CMCA information that is confidential and proprietary to be used solely for the Agency's related statistics, services and programs. Confidential Information refers to any and all information of a confidential, proprietary, or secret nature which is or may be related in any way to the family, medical records, job history, present or future, of CLIENT or any related data. Confidential Information includes, for example, but not limited to: spouses or other family members, ages, salaries, financial standings, criminal records, medical records and all other pertaining to the family information. CMCA will consider all information received from CLIENT to be strictly confidential, as required by the Privacy Act, and subject to the restrictions of this Agreement; except for information that is: (i) generally known to the public, (ii) in the possession of CMCA before receipt from CLIENT, (iii) obtained later by the Agency from a third party without restriction or violation of Agreements.

CMCA will not disclose CLIENT's Confidential Information to any other party without the prior written consent of CLIENT. CMCA may, however, disclose Confidential Information to its employees and/or programs but only if the employee has a legitimate need to know and has agreed to terms similar to those in this Agreement. Community Action Agency may also disclose this Confidential Information (i) to medical personnel in an emergency; (ii) to qualified personnel for research, audits, or program evaluation, as long as CLIENT identities are not identified; (iii) to a third party based on court orders; and (iv) to appropriate authorities in cases of suspected child abuse or neglect. CMCA will be responsible for any use or disclosure of Confidential Information by any of its employees or agents to third parties who should not share this information.

This Agreement may be amended only in writing and shall be governed by the laws of the State of Missouri.

Please sign below to indicate that you have read this Consent and agree with its terms.

Client Signature: _____ Date: _____

Interviewer's Signature: _____ Date: _____



WEATHERIZATION DEPARTMENT

800 N. Providence, Suite 104
Columbia, MO 65203
573-443-3500
WWW.CMCA.US

What is Weatherization?

Weatherization is the sealing of air leaks and installing insulation to make a residence more energy efficient. But CMCA's weatherization actually goes beyond that. Of course, we help you conserve energy because that will save you money. *But* when CMCA weatherizes your home, we also make improvements that make your home safer and healthier. We are here to help the low-income and especially the elderly, families with children, those with physical disadvantages, and others hit hardest by high utility costs.

What do we actually do?

We start by certifying that you are income-eligible for our Weatherization Assistance Program. And when it is your turn, your home will get an Energy Audit. A certified professional Auditor will come and conduct an Energy Audit of your home. The Energy Audit includes an interview with you related to the home; an indoor and outdoor inspection throughout your home going into every room, the attic, crawlspace or basement; measuring and recording the dimensions of the home, windows and doors; a blower door test, and testing of the gas fired appliances. The Auditor is required to take many photographs of your home, inside and outside.

The Energy Auditor will check:

Air-leaks	Refrigerator	Furnace
Indoor Air Quality	Stove	Air conditioner
Insulation	Water heater	Exhaust fans

After the Energy Audit, the Auditor will create a list of work items that will improve the energy efficiency of your home and help ensure health and safety. An experienced Contractor will then be sent to make the improvements.

REASONABLE COST – Though the improvements we make are free to you, they have a cost. We can only make improvements that will save enough money to justify the expense. The savings are calculated over the expected life of the improvement. For example, if an improvement can save \$100 a year; and that improvement is expected to last 10 years; then the improvement is justified if it cost less than \$1,000 (10 years x \$100/year) to install.

Misunderstandings about Weatherization?

WINDOWS and DOORS - Many people think of weatherization as a window and door replacement service. They expect the program to provide new double paned insulated windows or new doors. HOWEVER, that is seldom the case. New windows and doors cannot typically be financially justified. Weatherization will ensure that a home's existing windows are caulked, weather tight and broken panes will be replaced. We will also ensure that the existing doors are weather stripped and have appropriate bottom seals.

LEAKING ROOF and STRUCTURAL REPAIRS – Any significant roof or structural repair will have to be before weatherization work can proceed.

NEW FURANCE and AIR CONDITIONER – We examine existing equipment. When equipment is not functioning nor efficient, we can repair and sometimes replace. We cannot provide new equipment when there is none there to begin with.

PROMISES – We cannot guarantee that we will do ANYTHING until the Audit is made and the conditions are evaluated in the office. The home's condition will be evaluated in accordance with the latest guidelines and software provided by the Department of Energy. At this stage, we can make recommendations for improvements to your home.