SOUTH DAKOTA
WEATHERIZATION ASSISTANCE APPLICATION

The Weatherization program helps low-income households make their homes more energy efficient. Priority is given to households with individuals that are elderly or disabled and to families with children. Information on where to send the application is on page 5.

If you <u>are</u> receiving Energy Assistance check this box ☐ and only complete pages 1, 3, and 4. If you know your 9-digit Customer Identification Number (CID) from your Energy Assistance case, enter it here _____.

If you <u>are not</u> receiving Energy Assistance please complete all pages.

Print or type the information. The application will be denied if it is incomplete or if required proof is not attached.

TELL US YOUR ADDRESS

Mailing Address	*City*	*State*	*Zip Code*	*County*
Residence Address	***City***	***State***	***Zip Code***	***County***
Provide directions – use landmarks				
Contact Phone Number (can list more than one):		***e-mail address:***		

TELL US WHO LIVES IN THE HOME (LIST YOURSELF FIRST)

(W=White, A=Native American, B=Black, H= Hawaiian, O=Asian, S=Hispanic or Latino)

Name First	*MI*	*Last*	*Social Security #*	*Date of Birth*	**Race*	*Sex*	*Disabled*	*U.S. Citizen*
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No
						☐ Male ☐ Female	☐ Yes ☐ No	☐ Yes ☐ No

TELL US ABOUT INCOME

Enter GROSS INCOME (amount before deductions)such as *Wages, *Self-employment, *Alimony, *Social Security, *SSI, *SSI State Supplement, *BIA GA, *TANF, *Unemployment, *Worker's Compensation, *Veteran's Benefits, *Retirement, *Pensions, *Annuities, *Dividends, *Rental Income, *Tribal Lease or *Per Capita Income, *Net Gambling or Lottery Winnings, and *all other sources of income FOR ALL PERSONS IN THE HOME



ATTACH PROOF: Examples of proof are

- ⇒ Money NOT from work: Award letters or copies of checks
- ⇒ Money from work: wage stubs, copies of checks, employer statement verifying gross pay and date received.
- ⇒ Money from self-employment: copy of your most recent income tax return. (INCLUDE ALL PAGES AND SCHEDULES OF THE TAX RETURN) Partnership or S corporation should include a K-1 and 1065 forms.

If you send your application in:	Send proof of all income received in these 3 months:	If you send your application in:	Send proof of all income received in these 3 months
APRIL	January 1 - March 31	OCTOBER	July 1 - September 30
MAY	February 1 - April 30	NOVEMBER	August 1 - October 31
JUNE	March 1 - May 31	DECEMBER	September 1 - November 30
JULY	April 1 - June 30	JANUARY	October 1 - December 31
AUGUST	May 1 - July 31	FEBRUARY	November 1 - January 31
SEPTEMBER	June 1 - August 31	MARCH	December 1 - February 28

Income month 1:

Person with income:	*List type of income:*	*Date Received*	*Gross Amount*
			$
			$
			$
			$
			$

Income month 2:

Person with income:	*List type of income:*	*Date Received*	*Gross Amount*
			$
			$
			$
			$
			$

Income month 3:

Person with income:	*List type of income:*	*Date Received*	*Gross Amount*
			$
			$
			$
			$
			$

TELL US ABOUT THE HOME

Is the home currently being remodeled/or will it be remodeled within the next six months. □Yes □ No

Has the home ever been weatherized? □Yes □ No □ Not sure

If YES: □1-5 years ago □5-10 years ago □10-15 years ago

If YES, who did the weatherization?

I live in a-

□ House: □1-10 yrs □ 10-20 yrs. □ 20-45 yrs □ Greater than 45 yrs
Built before 1978? □Yes □No
Number of stories □1 □ 2 □ 3 Permanent basement? □Yes □ No
□ Mobile Home: List serial number or title number _____ Yr. _____
□ Apartment: How many apartments are in the building _____.

The home is heated with:

□ Natural Gas □ Electric □ Propane/Bottled Gas □ Fuel Oil/Kerosene □ Wood □Coal
Name of Supplier:_____

□ The additional (secondary) source used to heat the house is:
□ No other source used □ Natural Gas □ Electric □ Propane/Bottled Gas □ Fuel Oil/Kerosene □ Wood □Coal
If secondary fuel source is used percentage of heat from that source □ 10% □ 20% □ 30% □ 40%
Name of Supplier_____

The home has significant problems relating to:

□ Roof □ Electrical □ Plumbing □ Foundation □ Drainage (gutters) □ Ceiling/Walls/Floor
If you have anything checked, provide specific details:

Does your home have unhealthy conditions relating to:

□ Asbestos
□ Lead-Based Paint (home built before 1978)
□ Mold/Mildew
□ Not aware of unhealthy conditions
□ Chemical/Smoke Fumes
□ Sewage Fumes
□ Other
Explain

Do you own or rent the home? □ Own □ Rent
Is the residence currently for sale or will be in the next 6 months? □Yes □ No
If yes, explain _____
Is there a contract for deed □Yes □ No
Is there homeowners insurance? □Yes □ No

If you own the home, please attach a copy of the real estate tax notice to the application.

Do you rent the home or apartment? □Yes □ No
If yes, Name of Landlord_____
Landlord's Address_____
Landlord's phone number_____
Is this Subsidized, Low Income Housing (Section 8, Senior Housing, Public Housing) □Yes □ No



PLEASE READ THE FOLLOWING INFORMATION

Privacy Act Information: This information will be used to determine your eligibility for the weatherization program. Information obtained from this and other forms may be used by the U.S. Department of Energy to monitor the effectiveness of this program. In addition, this information may be used for investigative or prosecutorial proceedings in the event of fraudulent claims or statements. If you refuse to provide the information requested on this application, your home will not be considered for weatherization assistance. No information on this application is made available to the general public.

By my signature below

- I authorize the agency to make any necessary contacts to verify any aspect of eligibility.
- I authorize investigation of past, present and future heating costs to evaluate the effectiveness of the Weatherization program.
- I authorize employees of the community action agency to perform, monitor and inspect Weatherization work.
- I authorize Office of Energy Assistance and Weatherization staff of the Department of Social Services and Department of Energy to monitor to ensure quality weatherization work.
- I agree to report if the home is scheduled for acquisition or clearance by a Federal, State, or local program within 12 months from the date weatherization work is scheduled
- I understand that any false statement made in this application is legal grounds for prosecution by any agency of the government using this application as a basis for assistance and certify, under penalty of perjury, the truth of the information in this application.

_____/____/____
Applicant Signature Date

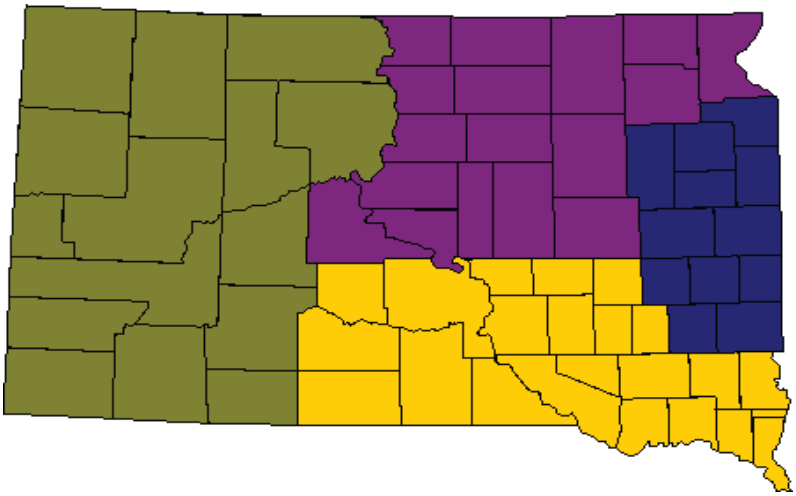
_____/____/____
Applicant Signature Date

Agency use only

_____/ /____
Approved by Date approved

in Household: _____ Total Income: _____ Maximum Allowable Income:_____

Please send the application to the Community Action Agency that serves your county. Refer to the map and/or the counties listed below to find the information for the community action agency for your county.



Inter-Lakes Community Action Partnership
PO Box 268, Madison, SD 57042
Phone: 605-256-6518
http://www.interlakescap.com
Counties served: Brookings, Clark, Codington, Deuel, Grant, Hamlin, Kingsbury, Lake, McCook, Miner, Minnehaha, Moody

Northeast South Dakota Community Action Program
104 Ash St. E, Sisseton, SD 57262
Phone: 605-698-7654
www.nesdcap.org
Counties served: Beadle, Brown, Campbell, Day, Edmunds, Faulk, Hand, Hughes, Hyde, McPherson, Marshall, Potter, Roberts, Spink, Stanley, Sully, Walworth

Rural Office of Community Services, Inc.
PO Box 547, Wagner, SD 57380
Phone: 605-487-7634
http://www.rocsinc.org
Counties served: Aurora, Bon Homme, Brule, Buffalo, Charles Mix, Clay, Davison, Douglas, Gregory, Hanson, Hutchinson, Jerauld, Jones, Lincoln, Lyman, Mellette, Sanborn, Todd, Tripp, Turner, Yankton, Union

Western South Dakota Community Action Agency, Inc.
1844 Lombardy Drive, Rapid City, SD 57701
Phone: 605-348-1460
http://www.wsdca.org
Counties served: Bennett, Butte, Corson, Custer, Dewey, Fall River, Haakon, Harding, Jackson, Lawrence, Meade, Perkins, Shannon, Pennington, Ziebach