

Weatherization Eligibility Chart

Purpose: To help you determine if you qualify for one or more energy-efficiency assistance programs. (You may qualify for both programs).

Arkansas Weatherization Program
(Utility Funded)

Weatherization Assistance Program
(Federally Funded)

Do you own your home?

IF

Have you lived there for more than one year?

IF

Do you receive service from any of the following utility companies?

Arkansas Oklahoma Gas
Arkansas Western Gas
Centerpoint Energy
Empire Electric
Energy
Oklahoma Gas & Electric
Southwestern Electric Power Company

IF

Complete the Energy-efficiency Self-Audit. Does your home meet the criteria?

IF

You may qualify for the utility-supported Arkansas Weatherization program. Complete pages 1 & 2 of the application.

IF NO

IF NO

Do you rent your home or have you owned your home for less than one year?

IF

Is your household income below 200% of the Federal Poverty Guideline (effective 4-1-09)?

IF

You may qualify for the Federally-funded Weatherization Assistance Program.

IF

You must complete the entire application— pages 1, 2, & 3.



Put Weatherization to Work for You!

What is Weatherization?

The Department of Energy's Weatherization Assistance Program (WAP) is the nation's core program for delivering energy efficiency services to low-income households. The program's goal is to reduce energy costs to low-income persons by improving the energy efficiency of their homes while ensuring their health and safety. Nationwide, weatherization benefits low-income households and communities and generates an average energy cost savings of \$300 per home each year. Professionally trained weatherization crews perform on-site home energy audits using state of the art equipment to identify outside drafts, inspect heating and cooling systems and perform health & safety checks. Weatherization crews install materials to make homes more energy efficient and make minor repairs to ensure safety. Once installed, the energy saving measures help to reduce heating and cooling costs for years to come.

Do I qualify for services?

Do I have to own my own home to qualify for services?

You don't have to own your own home to qualify. You may qualify whether you own or rent, live in a single-family home or in a mobile home.

Do I have to be a certain age or meet an income guideline to qualify?

While preference is given to persons over 60, persons with disabilities and in some cases, children; if you receive Supplemental Security Income (SSI) and/or TEA you are automatically eligible. You may also be eligible for assistance if your income meets the following federally established income guidelines:

Family Size	Annual Income Range 2011 Program Year*
1	\$21,780
2	\$29,420
3	\$37,060
4	\$44,700
5	\$52,340
6	\$59,980
7	\$67,620
8	\$75,260

**Income ranges are updated annually. For family units with more than 8 members, add \$7,480 for each additional family member.*

See reverse side for definition of income and program information.

How do I apply?

To apply for services or to get additional information on the Weatherization Assistance Program **contact:**

Central Arkansas Development Council
 Weatherization Assistance Program
 Post Office Box 580
 Benton, AR 72018
 Located at 722 Gaunt Street, Benton or call 501-776-8446
 or 501-776-9612



Weatherization Assistance Program

What it is: A local-state-federal program, it was initiated by the federal Department of Energy (DOE) in 1976 in response to the oil shortage, to help states and communities help those of low income have more energy-efficient, safe and healthy homes. It is the nation's largest residential energy-efficiency program

How it operates: In Arkansas, it is administered by the Department of Health and Human Services' Office of Community Services (OCS) and operated, primarily, by the private, nonprofit community action agencies. (Weatherization is one of scores of programs the community action agencies operate to help people of low income gain the basic necessities and strengthen economic self-sufficiency.)

What it does: It does computerized energy audits and uses advanced diagnostic technology to determine the energy-conservation needs of a home, providing, among other improvements, weatherstripping of doors and windows; caulking and sealing of cracks and holes; installation of compact fluorescent light bulbs, and smoke and carbon monoxide detectors. Each home differs in the energy conservation needs and recommendations.

Who it is for: The work is done free of charge for those who meet income and other guidelines – they must meet income eligibility guidelines.

How it is funded: DOE is the primary funder, for the nation. In Arkansas, OCS last year used \$2 million it received from DOE and supplemented it with \$1.8 million of the funds it gets from the federal Office of Community Services for the Low Income Home Energy Assistance Program (LIHEAP), improving 1,168 homes.

The program, since it was begun, has injected more than \$91 million into communities throughout the state to improve 61,000 homes, affecting the lives of hundreds of thousands of people, many of them elderly, disabled and children. (The program nationally, has improved the homes of 5.3 million individuals and families.)

The benefits: The program helps individuals and families have better lives and gain strength in their effort to advance. It makes their homes more secure from the weather, which helps them conserve energy and have more income for other basic necessities, including food, medicine, clothing, transportation – DOE estimates it reduces heating bills by 31 percent. It also contributes to the betterment of communities by creating jobs, generating the purchase of goods and services, strengthening housing stock, reducing homelessness, stabilizing neighborhoods and eliminating carbon emissions and the risk of fires.

Issues: There is limited federal funding for the work – although the program improves more than 1,000 homes a year in the state, the homes of an estimated 178,000 people are eligible for the service, according to poverty figures.

The program nationally received \$225 million in funds in the last year. Proposals for the next year range from \$233 million to \$237 million. According to a funding rule, if it is funded for more than \$233 million next year the 11 states in the South would receive a greater share of the national funds, enabling them to serve many more in need.

Definition of household income: Refers to total cash receipts before taxes from all sources. Money, wages and salaries before any deductions; regular payments from Social Security, retirement from all sources, unemployment compensation, strike benefits from union funds, worker's compensation, veteran's payments, training stipends, alimony and military family allotments; private pensions, government employee pensions (including military retirement pay), and regular insurance or annuity payments; dividends, interest, net rental income, net royalties, periodic receipts from estates or trusts, and net gambling or lottery winnings.

Proof of income includes copies of payroll checks or check stubs, statement from employer, statement from Employment office, statement from Social Security Admin. or a statement from anyone who is assisting with monthly household bills or other support. If unemployed, a statement from Employment office with benefit amount or showing you do not have an open claim.

Renters: The landlord must complete a Lessor Agreement. Applicant must complete a Tenants right form. These forms may be requested from the agency.

WEATHERIZATION IS MAKING ARKANSAS A BETTER HOME FOR ALL



CENTRAL ARKANSAS DEVELOPMENT COUNCIL
P.O. Box 580, Benton, AR 72018
WEATHERIZATION ASSISTANCE PROGRAM

DATE: _____

Dear Weatherization Applicant:

Federal Regulations require that we have copies of income documentation in each weatherization client's file. We must have this documentation before we can process any application for weatherization. Please be sure to complete each section of the application that applies to your household. *Failure to complete the application or supply documentation of all household income will result in your application being delayed.*

Please send ANY of the following types of **Documentation of Income** that apply to you:

- Copy of a letter or copy of monthly check from Social Security showing amounts of Social Security and/or SSI.
- Copy of a Bank Statement showing amounts of Direct Deposit of Social Security and/or SSI.
- Copy of letter or check from Veterans Administration showing amount of VA benefits.
- Documentation from Department of Human Services of any TEA benefits received.
- Copy of a payroll checks for at least the most recent month showing amount and time period covered.
- Statement from employer showing amount of earnings.
- Copy of previous year income tax return, if you are self-employed.
- Copy of a bank statement showing any interest or dividend received.
- Any other documentation or proof of total household income.
- If you are unemployed, a printout from the Unemployment office showing amount of unemployment or showing no benefits received.
- If you receive assistance with expenses from family or friends, have them write a statement of expenses and the dollar amount they help with, they must sign the statement and provide a phone number and address of contact.

NOTE: Income verification must include the Total Household Income; therefore, we must have copies of income from everyone in the household who has any income.

We appreciate your cooperation in sending in this information. If you have any questions, contact the Weatherization Office at 501-776-8446 or 776-9612.

**2011 Federal Poverty Guidelines
Yearly Income Limits**

Source: Federal Register, vol. 76, No. 13

January 20, 2011, pp. 3637-3638. Also see <http://aspe.hhs.gov/poverty/10poverty.shtml>

Persons in family	100% Poverty Guidelines	200% Poverty Guidelines
1	\$10,890	\$21,780
2	\$14,710	\$29,420
3	\$18,530	\$37,060
4	\$22,350	\$44,700
5	\$26,170	\$52,340
6	\$29,990	\$59,980
7	\$33,810	\$67,620
8	\$37,630	\$75,260
<i>At 200%, for families with more than 10 persons, add \$7,640 for each additional person.</i>		

**2011 Poverty Guidelines
Monthly Income Limits**

Source: Federal Register, vol. 76, No. 13

January, 20, 2011, pp. 3637-3638. Also see <http://aspe.hhs.gov/poverty/10poverty.shtml>

Persons in family	100% Poverty Guidelines	200% Poverty Guidelines
1	\$907.50	\$1,815.00
2	\$1225.83	\$2,451.67
3	\$1,544.17	\$3,088.33
4	\$1,862.50	\$3,725.00
5	\$2,180.83	\$4,361.67
6	\$2,499.17	\$4,998.33
7	\$2,817.50	\$5,635.00
8	\$3,135.83	\$6,271.67
<i>At 200%, for families with more than 8 persons, add \$636.67 for each additional person.</i>		



American Recovery and Reinvestment Act of 2009



ARKANSAS WEATHERIZATION ASSISTANCE PROGRAM APPLICATION

Please complete all sections of this application. Failure to do so may delay your approval. If you have any questions about this application and how to complete it, please call: 501-776-8446.

First Name	MI	Last Name	SSN	
/ /				
Street Address	Apt. Number	City	Zip Code	County
Postal Address (if different)				Date of Birth
City		Zip Code	County	

Home Phone	Alt. Phone	Email Address (if any)		
Race (Optional): <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Am. Indian <input type="checkbox"/> Asian <input type="checkbox"/> Pac. Islander <input type="checkbox"/> Other	Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Legal Permanent Resident (As of date) _____	Individual w/ Disabilities: <input type="checkbox"/> Yes <input type="checkbox"/> No	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Gross Mo. Income*: \$ _____ <input type="checkbox"/> Salary/Pay <input type="checkbox"/> SSI-Disability <input type="checkbox"/> Social Security <input type="checkbox"/> AFDC/TANF <input type="checkbox"/> Unemployment <input type="checkbox"/> Retirem't/Pension

Directions to House: _____

OTHER HOUSEHOLD MEMBERS

Name (First, Last)	Relationship to Applicant	Birth Date MM/DD/YY	Sex M/F	Race (Optional):	Gross Monthly Income
SSN: _____				<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Am. Indian <input type="checkbox"/> Pac. Isl.	\$ _____ <input type="checkbox"/> Salary/Pay <input type="checkbox"/> SSI/Disability <input type="checkbox"/> Social Security <input type="checkbox"/> AFDC/TANF <input type="checkbox"/> Unemployment <input type="checkbox"/> Retirem't/Pension
SSN: _____				<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Am. Indian <input type="checkbox"/> Pac. Isl.	\$ _____ <input type="checkbox"/> Salary/Pay <input type="checkbox"/> SSI/Disability <input type="checkbox"/> Social Security <input type="checkbox"/> AFDC/TANF <input type="checkbox"/> Unemployment <input type="checkbox"/> Retirem't/Pension
SSN: _____				<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Am. Indian <input type="checkbox"/> Pac. Isl.	\$ _____ <input type="checkbox"/> Salary/Pay <input type="checkbox"/> SSI/Disability <input type="checkbox"/> Social Security <input type="checkbox"/> AFDC/TANF <input type="checkbox"/> Unemployment <input type="checkbox"/> Retirem't/Pension
SSN: _____				<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Am. Indian <input type="checkbox"/> Pac. Isl.	\$ _____ <input type="checkbox"/> Salary/Pay <input type="checkbox"/> SSI/Disability <input type="checkbox"/> Social Security <input type="checkbox"/> AFDC/TANF <input type="checkbox"/> Unemployment <input type="checkbox"/> Retirem't/Pension
SSN: _____				<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Am. Indian <input type="checkbox"/> Pac. Isl.	\$ _____ <input type="checkbox"/> Salary/Pay <input type="checkbox"/> SSI/Disability <input type="checkbox"/> Social Security <input type="checkbox"/> AFDC/TANF <input type="checkbox"/> Unemployment <input type="checkbox"/> Retirem't/Pension
SSN: _____				<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Am. Indian <input type="checkbox"/> Pac. Isl.	\$ _____ <input type="checkbox"/> Salary/Pay <input type="checkbox"/> SSI/Disability <input type="checkbox"/> Social Security <input type="checkbox"/> AFDC/TANF <input type="checkbox"/> Unemployment <input type="checkbox"/> Retirem't/Pension

HOMEOWNER INFORMATION

Home Ownership: <input type="checkbox"/> Own or Pay Mortgage (YR Built _____) <input type="checkbox"/> Lease to Purchase (YR Built _____) <input type="checkbox"/> Rent (Provide landlord information)	Landlord Name: _____ Address: _____ City, State, Zip Code: _____
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UTILITIES and HOME CONDITION

Utilities: Electric Co.: _____ Acct. No. _____ Name on Account _____

Gas Co.: _____ Acct. No. _____ Name on Account _____

Do you CURRENTLY receive help paying your gas, light, heat, air or other utility bills? Yes No

Residence Type: Single house Apartment Duplex or similar unit Mobile home

Exterior Type: Veneer/ Masonry or Stucco Wood/Masonite Siding Brick/Stone Vinyl/Metal

Primary Heating Fuel: Natural Gas Other Gas Electricity Wood Fuel Oil Kerosene Other No Heat

Primary Heating Equipment: Central Heat Space Heater Heat Pump Fireplace Wood Stove Other No Heat

Air Conditioning: Window Unit Central Air No Air Conditioning

Insulation: Attic Wall Floor

Window Type: Single pane Double pane Storm windows

RELEASE

I, _____ (Print Name), release Central Arkansas Development Council (Agency Name) of all liability for any damage or harm related to weatherizing my home.

I also grant permission for the Arkansas Weatherization Assistance Program (WAP), grantees and successors, to use photographs of me and my home to document and promote the Arkansas Weatherization Assistance program and/or American Recovery and Reinvestment Act (ARRA) via TV and print news media, newsletters, brochures, Web sites, etc. ____ Yes ____ No

I further grant permission for the Arkansas Weatherization Assistance Program, grantees and successors, to obtain and review utility billing records for the applicant household before and after weatherization work is performed. I understand this information will be used to evaluate the effectiveness of the weatherization program and determine energy savings. ____ Yes ____ No

I certify that I have been informed of the above agreements and fully understand each provision, and that all information provided on this application is true and correct.

Applicant Signature _____ Date _____

FOR OFFICIAL USE ONLY:

Application Received: _____ Funding AWP Reg. DOE ARRA
 Application Approved: _____ Source: Co-op Other
 Client Database Job #: _____

ELIGIBILITY VERIFICATION – AT INTAKE*		ELIGIBILITY VERIFICATION – AT WEATHERIZATION*	
Priority Points TOTAL: _____	Federal Poverty Level <input type="checkbox"/> ≤75% <input type="checkbox"/> 76-100% <input type="checkbox"/> 101-125% <input type="checkbox"/> 126-150% <input type="checkbox"/> ≥150%	Priority Points TOTAL: _____	Federal Poverty Level <input type="checkbox"/> ≤75% <input type="checkbox"/> 76-100% <input type="checkbox"/> 101-125% <input type="checkbox"/> 126-150% <input type="checkbox"/> ≥150%
Age/HH size _____	Annual Gross Income _____	Age/HH size _____	Annual Gross Income _____
Income _____		Income _____	
SSI/AFDC (if minus points for income) _____	Verification Date _____	SSI/AFDC _____	Verification Date _____
Fuel Type _____		Fuel Type _____	
Disabled _____		Disabled _____	
Children _____		Children _____	
Housing Condition _____		Housing Condition _____	
Energy Burden _____		Energy Burden _____	
		Waiting Time _____	