



Regional Housing Authority

WEATHERIZATION APPLICATION FORM

Reducing Energy Costs for Southeast Alaskans

Alaska households with income up to 100% median family income (100% MFI) are eligible to apply for free home weatherization. Complete the following application or contact the weatherization service provider for your community. Home owners and renters may apply.

Include copies of documentation with your completed application:

- Income verification
- Rental agreement or home owner title / deed
- Utility statements heat / electric
- Alaska resident identification
- Signatures on pages 2, 4, and 5

Approved applicants receive program services at no cost.

Individuals may not participate in both the Weatherization Program and the AHFC Home Energy Rebate after May 1, 2008. Or, if individuals received Weatherization Assistance Program Services after April 14, 2008.

THRHA Service Areas

(Northern S.E. Alaska) Angoon -
- Kake - Yakutat

(Southern S.E. Alaska)
Petersburg – Saxman - Craig –
Klawock – Hydaburg- Kasaan -
Cape Pole - Coffman Cove - Dora
Bay – Edna Bay – Hollis -
La`Brouchiere Bay - Long Island
Naukati– Point Baker – Port
Protection – Thorne Bay – Whale Pass

THRHA Juneau Office Contact:
5446 Jenkins Drive Juneau, AK
99801

Steve Bennett (907) 780-6868
Fax: (907)780-3539

Qualifications

Individuals, **Native or non-Native**, who meet income guidelines, may apply for the Weatherization Program through THRHA. Homeowners and renters may apply. THRHA will provide program services at no cost to qualified applicants.

Does your household income qualify for the Weatherization Assistance Program?

THRHA WEATHERIZATION AND ENERGY EFFICIENCY PROGRAM INCOME LIMITS (Effective December 18, 2014)

Community	1 person	2 person	3 person	4 person	5 person	6 person	7 person	8 person
Hoonah & Angoon	52,800	60,300	67,800	75,300	81,400	87,400	93,400	99,400
Juneau	67,800	77,500	87,200	96,800	104,600	112,300	120,100	127,800
Saxman	62,300	71,200	80,100	88,900	96,100	103,200	110,300	117,400
Petersburg & Kake	58,900	67,300	75,700	84,100	90,900	97,600	104,300	111,100
Prince of Wales	52,800	60,300	67,800	75,300	81,400	87,400	93,400	99,400
Yakutat	56,300	64,300	72,300	80,300	86,800	93,200	99,600	106,000

— Funding to make your home more energy efficient —

To download an application form visit

www.AkWeatherization.org

Submit your completed application to THRHA

Fax (907) 780-3539 or mail to:
5446 Jenkins Drive, Juneau, AK 99801



Regional Housing Authority



Weatherization Application Instructions

All of this information must be provided before your application can be processed

Page 1

Applicant Name:

Name, phone numbers

Site Address:

Street name and number and/or lot, block and subdivision, as well as age of home

Mailing Address:

Where you receive your mail

Directions to Home:

If no street address, tell us how to find your house.

Type of Residence: (Mark boxes that apply)

Owner Occupied—if you own the house.

Rental Unit—if the house, trailer, apartment belongs to someone else

Single family—dwelling (house or mobile home) for one family

Multiple family—duplex, triplex, apartment house

Rental Unit:

If you are not the owner of the house provide the owner's name, phone number and complete address street or box, city, state, zip

Total Number in Household:

Write the number of people actually living in the house

Name and Social Security Number

List all the people that permanently live in the house. Fill in or circle the information for Social Security number, Sex, Date of Birth (DOB) and Sources of Income. Leave the calculation and annual total blank, this will be completed by THRHA weatherization staff when income is verified

Page 2

Applicant's Signature:

Read, affirm and sign the application.

Homeowner Certification:

If you own the house fill in your name and the property address (description) then sign as the Owner. If you are renting or someone else owns the house and does not live there, leave this section blank.

Page 3

Authorization for Release of Information

All adults (18 years and older) permanently living in the house need to print their name, social security number, then sign the form. Without signatures by all adults in the household, the application cannot be evaluated.

Page 4

Request to Release Confidential Records/Information

- x Each adult in the households needs to fill out the name and social security number spaces, then sign near the bottom. This form is required by the Department of Labor to verify employment and income information.

Page 5

Fuel Information Release Form:

- x Attach copies of fuel & electrical consumption records (that show quantities used) to this form.
- x Check the appropriate boxes to describe the fuel you use for heat and hot water.
- x Provide the name, phone, fax, address, account number for fuel and electric suppliers.
- x Provide your name, address.
- x Sign the release.

Client No.

[illegible]

Office Use Only: Requires signature and date by THRHA Employee for confirmation of receipt of application.

NOTE: INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. MAKE SURE YOU HAVE FILLED OUT THIS FORM IN ITS ENTIRETY AND THAT ALL NECESSARY ACCOMPANYING DOCUMENTS HAVE BEEN INCLUDED.

Date _____

Weatherization Assistance Application

Number in household who are: 55 years of age or older Native American Disabled

Applicant Affirmation

I subscribe and affirm, under the penalties of law, that the statements made in this application for weatherization assistance (including statements made in any accompanying papers) have been examined by me and to the best of my knowledge and belief are true and correct. Prior to any weatherization work, I agree to notify the agency of any changes in the information in this application. I understand that by signing this application, I consent to any other inquiry to verify or confirm the information I have given.

I certify that no household member has received an AHFC Home Energy Rebate after May 1, 2008.

I certify that no household member holds a Temporary Resident Status granted under the Immigration and Nationality Act as amended under the Immigration and Control Act of 1986 (Public Law 99-603).

This assistance has no affect upon my social security, public assistance or any other income I have. The weatherization work done will not obligate me financially and no lien

or mortgage will be held on the property, unless false or inaccurate information has been provided to make me eligible for this assistance. I will not be held liable for any injury or damage occurring on my property which is not a result of my negligence or malfeasance. I certify that I have given my permission to allow work and monitoring of work on the property listed in this application. I understand that it is the dwelling occupant and/or owner's responsibility to discover and correct unsafe or out-of-compliance conditions which exist apart from the weatherization work.

I understand that this application for weatherization assistance does not guarantee that assistance will be granted but will be used in determining eligibility for the program. Whether or not an eligible applicant will be provided assistance will depend in part upon the number of applications received, the funds available and the priorities to be met by the program.

I have read and understand the provisions of the Federal Privacy Information Act.

Applicant's**Signature** X _____**Date:** _____

Applicant's

Representative X _____**Date:** _____**Relationship** _____**Homeowner Certification**

(If applicant is renter, agency must use Permission To Enter Premises form and may require Landlord-Tenant Agreement)

I / We, _____, certify that I / we am / are the owner(s) of the property at _____

(print address)

Owner's**Signature** _____**Date:** _____

Office use only

Ownership verified by:	Examination of deed Tax Assessment Other:	List income documentation verified:
Agency Signature	Date	

Return application to:

The nearest THRHA Weatherization Office in your community or mail this application to
Tlingit-Haida Regional Housing Authority c/o Weatherization Processing
P.O. Box 32237 Juneau, Alaska 99803-2237

FEDERAL PRIVACY ACT INFORMATION FOR APPLICANTS WEATHERIZATION ASSISTANCE PROGRAM

TLINGIT-HAIDA REGIONAL HOUSING AUTHORITY

ALASKA HOUSING FINANCE CORPORATION

Privacy Act Provisions

Under section 3(e)(3) of the Privacy Act 1974, (5 USC 552a(e)(3)), each agency that maintains a system of records shall inform each individual from whom it solicits information of the authority which permits the solicitation of the information; whether disclosure is voluntary; the principal purpose for which the information is intended to be used; the routine uses which may be made of the information; and the consequences, if any, resulting from failure by the individual to provide the requested information. This statement is required by the Privacy Act to be furnished prior to the collection and use of the information requested on the application for weatherization. You may retain this statement for your records.

Program Authority

The specific authority for the maintenance of weatherization client information is sections 416 and 417 of the Energy Conservation and Production Act, Pub. L. 94-385. These sections direct the U.S. Department of Energy (DOE), which is a sponsor of this program, to monitor the effectiveness of this program and to require a weatherization agency implementing this program to keep records for DOE monitoring.

Alaska Housing Finance Corporation is the recipient of weatherization funds from both DOE and the State of Alaska Department of Health and Social Services, and is required by 10 CFR 440 to document the eligibility of every dwelling unit weatherized and to maintain records for program monitoring and evaluation.

Voluntary disclosure

Your responses to the request for information on the Weatherization Assistance Application, Authorization for Release of Information form, and Fuel Information form are entirely voluntary.

Principal purpose of information

The information will be used by the local weatherization agency to implement the weatherization program. It will be used by the DOE and Alaska Housing Finance Corporation to monitor the effectiveness of this program.

Routine uses

The information which you provide may be used in monitoring, evaluating, and planning housing programs. In addition, the information may be used in investigative, enforcement or prosecutorial proceedings. Your application information is kept confidential.

Effects of not providing information

Should you decline to provide the information requested on the Application and forms, your dwelling cannot be considered for weatherization assistance.

WEATHERIZATION ASSISTANCE PROGRAM

Client No. _____

TLINGIT-HAIDA REGIONAL HOUSING AUTHORITY

ALASKA HOUSING FINANCE CORPORATION

AUTHORIZATION**for Release of Information****CONSENT**

I authorize and direct any Federal, State, or local agency, organization, business, or individual to release to _____ THRHA _____ any information needed to complete and verify my application for assistance under the Low-Income Weatherization Assistance Program (WAP). I understand and agree that this authorization or the information obtained with its use may be given to and used by the Alaska Housing Finance Corporation (AHFC) in administering and enforcing program rules and policies.

INFORMATION COVERED

I understand that previous and current information regarding me and my family unit may be needed. Verifications and inquiries that may be requested, include but are not limited to:

Employment and Income
Public Assistance payments

GROUPS OR INDIVIDUALS THAT MAY BE ASKED

The groups or individuals that may be asked to release the above information include but are not limited to:

Banks and other Financial Institutions
Medical and Child Care Providers
Past and Present Employers
Retirement Systems
Social Security Administration
State Unemployment Agencies
Support and Alimony Providers
Veterans Administration
Welfare Agencies

COMPUTER MATCHING NOTICE AND CONSENT

I understand and agree that AHFC or _____ THRHA _____ may conduct computer matching programs to verify the information supplied for my application or recertification. If a computer match is done, I understand that I have a right to notification of any adverse information found and a chance to disprove incorrect information. AHFC or the Weatherization agency may in the course of its duties exchange such automated information with other Federal, State, or local agencies, including but not limited to: State Employment Security Agencies, State welfare and food stamp agencies, and the Social Security Administration.

CONDITIONS

I agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file with _____ THRHA _____. I understand I have a right to review my file and correct any information that is incorrect.

SIGNATURES (All adult residents must sign. Please request another copy if necessary.)

X _____
Applicant Signature Date

Applicant Printed Name SSN#

X _____
Adult Household Member Signature Date

Adult Household Member Printed Name SSN#

X _____
Adult Household Member Signature Date

Adult Household Member Printed Name SSN#

X _____
Adult Household Member Signature Date

Adult Household Member Printed Name SSN#

X _____
Adult Household Member Signature Date

Adult Household Member Printed Name SSN#

X _____
Adult Household Member Signature Date

Adult Household Member Printed Name SSN#

Reason(s) for missing signatures: _____

Client No.

Release

To: Fuel Supplier	Mailing Address	
City	AK Zip Code	Account No.

I understand that this information will be used only to provide data for the above-named agency, and no information obtained through this release shall be made public in such a manner that the dwelling or occupants can be identified.

Signature **X** _____ Date _____
If possible, attach copies of fuel consumption records (that show quantities used) to this form.

LANDLORD - TENANT AGREEMENT

PERMISSION TO ENTER PREMISES / RENTAL AGREEMENT

- **Landlord, complete this page and the Landlord Certification on the back. Also, provide proof of ownership.**
- **Tenant, complete the Renter Certification on the back.**

I, _____, certify that I am the owner/authorized agent, herein
Name (Please print.)

referred to as "Owner" for the property located at:

Street Address or Legal Description City State

The property is presently rented to the following:

Primary tenant _____ for \$_____ rent per _____ month _____ year.

Number of rental dwelling units in this structure: _____.

Owner/Agent authorizes _____ as provider of Weatherization services to conduct energy related building inspections and assessments, repairs, and improvements. Any materials installed under this agreement shall remain as part of the premises.

The amount of materials and labor provided by the Weatherization provider will not exceed \$4,000 per unit for buildings with four or fewer units (\$3,000 per unit for buildings with five or more units) unless the Owner is willing to contribute.

Owner will be asked to contribute 50% of the cost of Weatherization services above the not-to-exceed limit. The Weatherization Provider will match dollar-for-dollar an Owner contribution up to an amount estimated by the Weatherization assessor, not to exceed \$4,000 of Weatherization funds per unit for buildings with four or fewer units (\$3,000 per unit for buildings with five or more units). The cost of building permits shall be borne by the Owner of the building.

An addendum defining the scope of work to be accomplished on this building will be attached to this agreement following the Weatherization assessment, should the Owner choose to participate financially or with in-kind services.

Owner will be asked to contribute toward Weatherization improvements. Please indicate the option you think best suits your needs. [Note: Option "c." is available only to individual landlords (not businesses or consortiums) who own four or fewer rental units either in single or multi-family structures combined.]

- _____ Cash contribution toward Weatherization services. (In addition to (d.) below, Weatherization Provider will match Owner contributions dollar-for-dollar, to an amount to be determined by the Weatherization assessor. At the discretion of the Weatherization provider, this contribution may be paid directly to a contractor or vendor designated by the Weatherization provider.)
- _____ In-kind contribution (to be completed prior to Weatherization improvements wherever possible). Legitimate expenses can qualify for the match defined in (a.) above.
- _____ Waiver of Owner contribution based on verification by the Weatherization provider that *the Owner's gross household income* does not exceed Weatherization income guidelines.
- _____ No Owner contribution toward Weatherization improvements. Weatherization provider will provide up to \$4,000 per unit for buildings with four or fewer units (\$3,000 per unit for buildings with five or more units).

Only eligible Weatherization measures as defined by the Alaska Weatherization Assistance Program shall be applied to any building, if the funds used to perform those measures are funds provided by Alaska Housing Finance Corporation (AHFC), and/or the U.S. Department of Energy (DOE). No undue enhancement shall occur to the value of the dwelling units as a result of Weatherization work performed. Undue enhancement is defined as any enhancement to a building that increases the value of the property and does not provide energy conservation or health and safety benefits to the tenant.

Commencing on the date the Owner and/or tenant signs that work is complete and continuing for a period of eighteen (18) months, Owner agrees not to increase rents on units weatherized. If a lease in effect expires prior to the end of the eighteen-month period, a new lease may be signed, but rents will remain at the previous level until the expiration of the eighteen-month period, unless demonstrably related to matters other than Weatherization work. (10CFR 440.22(b)(3)(ii)) Demonstrably related to matters other than Weatherization work performed is defined as an increase in excess of 25% per year in (1) Fair Market Value of rental units, (2) an increase in property taxes, or (3) an increase in the rate of utilities paid by Owner. Any increases should be split equally between all units in the building.

Owner also agrees not to terminate or evict any covered tenants or any subsequent tenants, commencing on the date the Owner and/or tenant signs that work is complete and continuing for a period of eighteen (18) months. This provision is in effect provided the tenant complies with all obligations owed to the Owner in accordance with any leases or rental agreements between the Owner and tenants.

This agreement applies to present tenants and any subsequent tenants for the eighteen-month period.

If a tenant believes rents have increased contrary to the provisions of this agreement or has received an eviction notice without cause, the tenant may contact Alaska Legal Services.

This agreement shall run with the land and/or weatherized unit in the case of sale or transfer to other Owner(s)/agents. The Owner is responsible to give official notice of this agreement to any subsequent Owner(s).

Either party to this agreement may bring an action for specific performance of its terms. Tenants residing in dwelling units covered by this agreement are intended third-party beneficiaries of any of the provisions of the agreement related to rental increases, evictions, and terminations of tenancies.

TENANT Certification

I, _____, certify that I am currently renting a dwelling unit located at:
Name (Please print.)

Street Address or Legal Description City State

I have read and understand the terms of this agreement.

Signature Date

LANDLORD (Owner or Authorized Agent) Certification

I have read and agree to the terms of this agreement.

Signature of Owner or Authorized Agent * Date

Mailing Address City State Zip

Phone No.: Fax No.: Msg. No:

*** AGENT: INCLUDE A COPY OF YOUR AGENT AGREEMENT WITH THE OWNER.**

WEATHERIZATION SERVICE PROVIDER Certification

I have read and agree to the terms of this agreement.

Signature of Weatherization Service Provider Authorized Agent Date

Tlingit-Haida Regional Housing Authority
P.O. Box 32237 Juneau, AK 99803
(907) 780-6868(p) (907) 780-3539(f)



Regional Housing Authority

Tlingit-Haida Regional Housing Authority
P.O. Box 32237 Juneau, Ak 99803
(907) 780-6868(p) (907) 780-3539(f)

Dear Landlord:

Attached is an Addendum to the *Landlord-Tenant Agreement Permission to Enter Premises/Rental Agreement* (LTA) that you signed to allow the Weatherization of your rental unit for the tenant named on that document. The Addendum must be signed and returned to our office before we can proceed with the Weatherization of the dwelling.

Landlords are required to contribute one half of the cost of Weatherization materials and labor in excess of \$4,000 per dwelling unit; or for multi-family buildings of five or more units, one half of the cost of Weatherization materials and labor in excess of \$3,000 per unit. The dollar-for-dollar match may not exceed \$4,000 for buildings of one to four units; \$3,000 for multi-family buildings of five or more units. In other words, the maximum amount of Weatherization funds allowed per eligible unit in a building of one to four units is \$8,000; the maximum per unit limit for an eligible unit in a multi-family building of five or more units is \$6,000.

Attached you will find a description of proposed Weatherization improvements.

If you cannot make the required payment, the job may still proceed without all of the items being completed. If you choose to contribute, please make your check or money order payable to **Tlingit-Haida Regional Housing Authority**. If a contribution is required, it must be received by **10 days of a signed agreement** before we will order materials and/or proceed with the work.

In order to complete our work in a timely manner, **please respond to this request within fifteen days of the mailing date**. Failure to respond within the allotted time frame may result in the cancellation of the project.

Thank you for your interest in this program. If you have any questions about this matter, please feel free to contact me at _____.

Sincerely,

THRHA Representative

Alaska Weatherization Assistance Program

**Landlord-Tenant Agreement Permission to
Enter Premises/Rental Agreement
Addendum**

Client # _____

Date: _____	Contractor: _____ name/telephone
Landlord: _____	Tenant: _____
Mailing _____	Residence _____
Address: _____	Location: _____
Telephone: _____	Telephone: _____

Total Project Cost: \$ _____ **Total Landlord Contribution:** \$ _____

This is an Addendum to the *Landlord-Tenant Agreement Permission to Enter Premises/Rental Agreement (LTA)* signed by the above-named Landlord and Tenant, and the Weatherization service provider known as THRHA. It becomes effective when the Weatherization service provider receives this Addendum, signed by the Landlord; any applicable Landlord contribution; and any other documentation required as specified in this Addendum or the scope of work.

Attached is a scope of work, which describes the Weatherization measures and materials proposed for the dwelling unit. The cost of any building permits shall be borne by the Owner of the building.

In addition to the provisions of the LTA, the following provisions shall apply:

- The Landlord may elect to pay the additional cost of the proposed Weatherization measures or may elect to have the job reduced to those measures that total less than the allowed limit.
- All materials installed in the dwelling shall become the property of the Landlord upon installation and remain with the building.
- The Landlord agrees not to increase rents commencing on the date the Landlord signs this Addendum and continuing eighteen (18) months after the date the Landlord and/or the Tenant sign(s) that the work is complete. If a lease in effect expires prior to eighteen (18) months after the date the work is completed, a new lease may be signed, but rents will remain at the previous level until the expiration of the eighteen month period, unless demonstrably related to matters other than Weatherization work.

“Demonstrably related to matters other than Weatherization work” is defined as increases in excess of 25% per year in (1) Fair Market Value of rental units, (2) an increase in property taxes, or (3) an increase in the rate of utilities paid by the owner. Any increases should be split equally between all units in the building.

- The Landlord also agrees not to terminate or evict any covered tenants or subsequent tenants, commencing on the date of signing this agreement, and continuing for a period of eighteen months after the Landlord and/or the Tenant sign(s) that the work is complete. This provision is in effect provided that the Tenant complies with all obligations owed to the Landlord in accordance with any leases or rental agreements between the Landlord and the Tenant.
- This agreement applies to present tenants and any subsequent tenants for the eighteen-month period, and the Owner agrees to provide subsequent tenants with a copy of this agreement.

In addition to the provisions outlined above, all provisions of the Alaska Uniform Landlord and Tenant Act (AS 34.03.010-380) apply to the Landlord and Tenant(s) who are parties to this agreement.

Either party to this agreement may bring an action for specific performance of its terms. Tenants residing in dwelling units covered by this agreement are intended third-party beneficiaries of any provisions of the agreement related to rental increases, evictions, and termination of tenancies.

Landlord

I have read and agree to the terms of this Addendum and do hereby authorize the Weatherization service provider to proceed with the proposed improvements. I elect to make

- () a cash contribution toward improvements in the amount noted above.
- () an in-kind contribution toward improvements in the amount noted above. [Note: Prior approval must be given for all in-kind contributions. Call this office *before* completing this Addendum to verify that your in-kind contribution qualifies. Once it has been approved, sign and date this Addendum and return it to this office *with copies of the invoices for your purchases if you have not already provided them.*]
- () no cash contribution toward improvements because the costs do not exceed the per unit limit, or I wish to keep the cost of improvements to less than the per unit limit.

If you do not elect to contribute the total owner contribution, please contact _____ at _____.

Signature of Landlord

Date

\$ _____
Amount of Check

Bank Name on Check or Money Order

Check Number

Weatherization Service Provider

I have read and agree to the terms of this agreement.

Signature of Authorized Agent for Weatherization Service Provider

Date

Please respond to this request within thirty days of the date of this Addendum.

In order to complete our work in a timely manner, this request requires your prompt attention. Failure to respond within the allotted time frame will result in the cancellation of the project.

For Office Use Only:

Signed, completed copy sent to landlord and tenant:

_____/_____/____