

OPERATION WEATHERIZATION
Starting Super Saturday -November 5, 2011
10 a.m. - 2 p.m.



Community Agency Referral

Agency Name:	Case Manager Name:
Case Manager Phone:	Case Manager E-mail:
Applicant Name:	
Street Address:	
City:	
Phone Number:	E-mail:

Do You: Own Rent Rent to Own

No. of Household members (Including self):

Adults (19-up) _____ Teens (13-18) _____ Children(0-12) _____

Is anyone in the house legally disabled: Yes

If Yes, who: Self Other Adult in home Senior (60 or over) Child or Teen

This dwelling is a: 1-story 2-story Mobile Home Apartment

Primary Heat Source: Natural Gas Total Electric Propane

Utilities are included in Rent: Natural Gas Electric Both

Do you own a ladder: No Yes Step Ladder Extension Ladder

How many bedrooms: One Two Three Four or more

Which three rooms in your home are the coldest (most concerned about keeping warm)?

In these rooms, how many windows and outside doors are there? Windows _____ Doors _____

Are you or another adult in the home available on Saturday, November 5th? Yes No

Approximately how many minutes does it take to reach town from your home: _____ Minutes