



Weatherization Program

Homeowner/Authorized Agent Weatherization Agreement



I, (name) _____, certify that I am the owner/authorized agent for the property located at: _____.

I authorize the **COMMUNITY ACTION COUNCIL of Lewis, Mason & Thurston Counties** (CAC) to make the following *proposed* weatherization repairs and improvements, as they apply, to said dwelling unit:

Work Proposed – Reduce or stop infiltration through holes in the building envelope; insulate attic, walls and floors and ventilate as necessary; ventilate living space; provide for necessary repair or replacement to doors/windows; furnace audit, cleaning and tune-up, insulate ducts, pipes and water heaters; address health and safety issues; any repairs necessary to protect and extend the life expectancy of the aforementioned measures. All weatherization improvements performed on said dwelling unit will be completed in a workmanlike manner. **NOTE: Due to measure installation issues, funding limitations and/or program regulations, this list of measures may not be ALL inclusive.**

I understand that some or all of the work will be financed by a grant using Federal, State and/or private funds from Community Action Council and that CAC will need to inspect the work that is funded by the grant. Your home may also be selected at a later date for second party, quality control inspections. I agree to give CAC and/or secondary inspectors' access for such inspection(s). I agree to release and hold harmless Community Action Council from any and all claims, losses, damages, costs and liabilities, directly or indirectly arising from, or in connection with, the work to be performed, the materials and labor required for the work and/or the inspection of the work.

I further agree and acknowledge that CAC HAS NOT AND DOES NOT MAKE ANY IMPLIED OR EXPRESS WARRANTY (including but not limited to implied warranty of merchantability or fitness), representation, or promise with respect to the work to be performed, the materials and labor required for the work, or the work, in fact, producing any savings in energy consumption.

Privacy Disclosure – As part of the weatherization process, the Auditor, air seal crew and subcontractors will need full access to all areas of your home including attached garages, attics, basements, crawlspaces, kneewalls, HVAC ducts, chases, cabinets, and any hidden areas of the building envelope. Photograph documentation of the building and its components is required. Photos are taken at the initial audit, throughout the installation phase and upon final inspections and are retained as part of your weatherization file. ANY and ALL items of a personal nature that the homeowner doesn't want revealed during the course of the project should be removed from the property or stored in sealed containers. Items inadvertently "discovered" during the course of any phase of the project that are considered hazardous or are illegal to possess by STATE/FEDERAL/LOCAL law(s) will be cause for a STOP WORK ORDER which will stay in effect until determined that satisfactory accommodations were made by the owner to remove the item(s) in question.

Once certified, the applicant's file is retained (maximum one year) for prioritization and subsequent weatherization services. In cases where a file is determined to be incomplete or the applicant is ineligible for services, a Denial Letter will be issued. If weatherization services are denied, the applicant will be informed in writing as to the reason for such denial and any subsequent request for appeal by the applicant may be addressed to the Director of Housing & Emergency Services located at the address stated below.

I also grant permission for the following (as checked below):

- For purposes of training and/or public relations, I grant CAC the use of the photographs of the weatherization work performed.*
- For purposes of weatherization performance, I allow the utility or fuel supplier listed below to release information on my fuel or utility bills, both past and future, to the Community Action Council of Lewis, Mason & Thurston Counties, or its designee.*

Utility or Fuel Distributor: _____

Client Signature _____ Date _____ CAC Representative _____ Date _____