

Weatherization Assistance Program CLIENT HOUSING QUESTIONNAIRE

Name:	Email:
How did you hear about us:	Can DCCAP contact you via email?

1. How old is your home?	
2. How long have you lived there?	
3. Has the property ever been weatherized before?	YES/ NO If so, about when?
4. If so, was the heating system repaired or replaced?	YES/ NO
5. How old is the heating system?	
6. Do you have fuel right now?	YES/ NO
7. Is your heating system operational?	YES/ NO
8. Do you have a maintenance service agreement with your fuel distributor or service contractor?	YES/ NO If yes, when was your last clean and tune?
9. What type of heating system does your home have? Please Circle	<div style="display: flex; justify-content: space-between;"> Forced Warm Air Steam Boiler </div> <div style="display: flex; justify-content: space-between;"> Hot Water Boiler Electric Baseboard </div> <div style="display: flex; justify-content: space-between;"> Wood Stove Space Heaters </div>
10. What type of fuel does your heating system use?	<div style="display: flex; justify-content: space-between;"> Natural Gas Electric Propane </div> <div style="display: flex; justify-content: space-between;"> Oil Kerosene Wood </div>
11. Do you currently use a second refrigerator?	YES/ NO
12. Do you currently use a separate freezer?	YES/ NO
13. Is your roof leaking?	YES/ NO

PLEASE READ AND SIGN

I certify that, to the best of my knowledge my heating system **IS/ IS NOT** in good working order. I further understand that if my heating system is found to be in an unsafe condition, or found to be in an inoperable condition requiring substantial repairs, that the audit will be stopped and weatherization services will be suspended until the heating system is repaired or replaced.

Client Signature

Date