Dear Emergency Furnace Assistance Applicant:

Enclosed you will find an application for the Emergency Furnace Assistance Program. In order for our agency to process your request, we will need the following documents completed and returned:

1) The enclosed/attached South Dakota Weatherization Assistance Application. The application must be filled out and signed by applicant and any co-applicants (co-applicants refers to any adult living in the household). Please check the box for the Emergency Furnace Repair/Replacement Program.

2) If you are not on the current fuel assistance, you will need apply and be approved before we can assist with any furnace repairs. To apply for energy assistance you may visit their website at http://dss.sd.gov or you may call 1-800-233-8503 to request an energy assistance application.

3) Proof of homeownership. This may be a copy of the property tax notice, deed, notarized contract for deed, or if a mobile home, a copy of the mobile home title. Rentals are not eligible for this program unless the landlord is a participant of the low income energy assistance program.

GROW South Dakota has additional programs that you may be interested in:

1) Weatherization – To have your application processed for the weatherization, please check the Weatherization Assistance Program box on the application. If your home received weatherization services after September 30, 1994, it will not be eligible.

General Disclaimer- All programs have various eligibility, income or funding requirements. Funding availability varies.

If you have any questions, concerning your request, feel free to contact our agency.

Sincerely,

Kristin Hofland
Kristin Hofland
Weatherization Coordinator
TELL US WHO LIVES IN THE HOME (LIST ALL HOUSEHOLD MEMBERS)
*You are not required to furnish race or gender information.

| Name: First | MI | Last | Last 4 Digits of Social Security # | Date of birth | *Race: a=Native American b=Asian c=black d=Hawaiian e=white f=Other g=Multi-Race | *Ethnicity a=Hispanic b=Not Hispanic | *Gender M=Male F=Female O=Other | Disabled: Y=Yes N=No | Grade of Post Secondary School Level Completed | Insurance: a=Medicaid b=Medicare c=CHIP d=State Provided Adult e=Military f=Direct paid g=Employer provided h=none | Military: A=Active b=Veteran |
|-------------|----|------|-----------------------------------|---------------|---------------------------------------------------------------------------------|-----------------------------------|----------------------|-------------------|----------------------|-----------------------------------------------|-----------------------------------------------|-------------------|
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### TELL US ABOUT INCOME & NON-CASH BENEFITS


**WORK STATUS:** A=full time; b=part time; c=Migrant Seasonal Farm Worker; D=unemployed 6 mo. or less; E=Unemployed more than 6 mo.; f=not in labor force; g=retired

<table>
<thead>
<tr>
<th>Person with Income</th>
<th>Work Status</th>
<th>Type of Income &amp; Frequency</th>
<th>Gross Amount</th>
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</thead>
<tbody>
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### TELL US ABOUT THE HOME

1. This is a
   ___ House: Number of Stories
   ___ 1 ___ 2 ___ 3
   Built before 1978? ___ Yes ___ No
   Age of Home
   Permanent basement? ___ Yes ___ No
   ___ Mobile Home: Serial Number or Title Number
   ___ Apartment

2. Do you currently own or are you buying the home?
   ___ Yes ___ No If yes purchased from:
   ___ is this a contract for deed? ___ Yes ___ No
   ___ is the residence for sale? ___ Yes ___ No
   ___ have homeowners insurance? ___ Yes ___ No
   ___ is it located in a flood zone? ___ Yes ___ No

If you own the home, please attach a copy of the real estate tax notice and the deed to the property.

If rent, Name of Landlord: ____________________________

   Landlord Address: ____________________________
   Landlord’s Phone: ____________________________

3. Is the home currently being remodeled/ or will be within the next 6 months. ___ Yes ___ No

4. Has the home ever been weatherized?
   ___ Yes ___ No ___ Unsure If yes, who did the weatherization? ____________________________

5. The home is heated with:
   ___ Natural Gas ___ Electric ___ Wood
   ___ Fuel Oil ___ Kerosene ___ Coal
   ___ Propane/Bottled Gas
   ___ Other

6. Is the problem with:
   ___ Plumbing ___ Roofing
   ___ Electrical ___ Siding
   ___ Heating ___ Other Please List

   ____________________________
   ____________________________

7. What type of Siding do you have?
   ___ Vinyl ___ Steel
   ___ Wood ___ Masonite
   ___ Stucco ___ Other

8. The home has unhealthy conditions relating to:
   ___ Lead Based Paint (home built before 1978)
   ___ Mold/Mildew ___ Sewage fumes
   ___ Asbestos ___ Chemicals/Smoke Fumes
   ___ Other ___ Not aware of unhealthy conditions

   ____________________________
   ____________________________

Have you ever received a forgivable loan or down payment assistance through another Affordable Housing Project such as, Homes are Possible Inc. (HAPI), Home Ownership Assistance Program (HOAP), Northeast South Dakota Community Action Program (NEEDCAP), Opportunities for Independent Living (OIL), South Dakota Housing Development Authority (SDHDA) or Sisseton-Wahpeton Oyate (SWO)?

   ___ Yes ___ No
**Privacy Act Information:** This information will be used to determine your eligibility for the program. In addition, this information may be used for investigative or prosecutorial proceedings in the event of fraudulent claims or statements. If you refuse to provide the information requested on this application, your home will not be considered for assistance. No information on this application is made available to the general public. This authorization is given only in connection with its use by GROW South Dakota in its administration of its programs and for no other purpose. It shall continue in effect until such time as I state, in writing, to GROW South Dakota.

**By my signature below**

- I authorize the agency to make any necessary contacts to verify any aspect of eligibility.
- I authorize investigation of past, present and future heating costs in order to evaluate the effectiveness of the Weatherization Program.
- I authorize employees of GROW South Dakota to perform, monitor and inspect work.
- I authorize Office of Energy Assistance and Weatherization staff of the Department of Social Services to monitor to ensure quality Weatherization work.
- I agree to report if the home is scheduled for acquisition or clearance by a Federal, State or local program within 12 months from the date Weatherization work is scheduled.
- I authorize any person, agency or institution to supply information requested by GROW South Dakota concerning me or my family and to allow reproduction of records in their possession pertaining to me or my family by a duly authorized representative of GROW South Dakota.
- I understand that any false statement made in this application is legal grounds for prosecution by any agency of the government using this application as a basis for assistance and certify, under penalty of perjury, the truth of the information in this application.
- I have furnished this application information to the best of my knowledge and by this signature approve and verify it.
- Any misrepresentation regarding this information may lead to the recapture of the total amount of funds allocated to each project.

<table>
<thead>
<tr>
<th>Applicant Signature</th>
<th>Date</th>
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</thead>
<tbody>
<tr>
<td>Co-Applicant Signature</td>
<td>Date</td>
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</table>

**TELL US ABOUT THE HOME**

**AGENCY USE ONLY**

<table>
<thead>
<tr>
<th>Approved by</th>
<th>Date Approved</th>
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<tbody>
<tr>
<td># in Household</td>
<td>Total income</td>
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Please send the application to the Community Action Agency that serves your county. Refer to the map and/or the counties listed below to find the information for the community action agency for your county.

**Inter-Lakes Community Action Partnership**  
PO Box 268, Madison, SD 57042  
Phone: 605-256-6518 or 1-800-896-4105  
http://www.interlakescap.com  
Counties served: Brookings, Clark, Codington, Deuel, Grant, Hamlin, Kingsbury, Lake, McCook, Miner, Minnehaha, Moody

**Northeast South Dakota Community Action Program (dba GROW South Dakota)**  
104 Ash St. E, Sisseton, SD 57262  
Phone: 605-698-7654  
www.growsd.org  

**Rural Office of Community Services, Inc.**  
PO Box 70, Lake Andes, SD 57356  
Phone: 605-487-7634 or 1-800-793-3290  
http://www.rocsinc.org  
Counties served: Aurora, Bon Homme, Brule, Buffalo, Charles Mix, Clay, Davison, Douglas, Gregory, Hanson, Hutchinson, Jerauld, Jones, Lincoln, Lyman, Mellette, Sanborn, Todd, Tripp, Turner, Yankton, Union

**Western South Dakota Community Action Agency, Inc.**  
1844 Lombardy Drive, Rapid City, SD 57701  
Phone: 605-348-1460 or 1-800-327-1703  
http://www.wsdca.org  
Counties served: Bennett, Butte, Corson, Custer, Dewey, Fall River, Haakon, Harding, Jackson, Lawrence, Meade, Perkins, Shannon, Pennington, Ziebach