



Phone (605) 698-7654 Fax (605) 698-3038 Website: www.growsd.org Email: info@growsd.org

#### Dear Weatherization Applicant:

Enclosed you will find an application for the South Dakota Weatherization Assistance Program. In order for our agency to process your weatherization 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).
- 2) If you are not on the current fuel assistance, you will need to submit a copy of your last 3 months' income for the household. To apply for energy assistance, you may visit their website at <a href="http://dss.sd.gov">http://dss.sd.gov</a> 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, or if a mobile home, a copy of the mobile home title.

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

Sincerely,

Bailey Deslauriers

Bailey Deslauriers

**Energy Services Specialist** 







## **GROW South Dakota Sisseton, SD**

### **Weatherization Assistance Program**

The home, as well as the applicant, will need to meet criteria for this program. It is the discretion of GROW South Dakota to cancel an application if the rehabilitation is not considered feasible.

- This program is in the form of a grant, there is no financial obligation unless the applicant is renting, in which case the **landlord** is responsible for 1/3 of the cost of the project.
- . If your home has received weatherization services in the previous 15 years, it will not be eligible for this program.
- · Rental units can be eligible if they meet the DOE requirements. The landlord is responsible for 33.3% of the total cost unless the homeowner's income falls below 200% of the poverty income guidelines. There is additional paperwork that needs to be completed by the homeowner and applicant, prior to any approval for rental units.
- Ownership must be verified. A copy of the deed or property tax notice must accompany the application. Ownership for mobile homes requires a copy of the mobile home title.
- · A home audit is conducted by the GROW South Dakota Energy Auditor. Information is obtained and installed in the NEAT/MHEA computer program. This program will determine what measures, if any, are allowed to be installed on the home.

Energy saving measures to be considered may include but are not limited to:

- 1. Insulation, proper ventilation.
- 2. Air infiltration measures, weather stripping, glass replacement, foam sealant, caulk.
- 3. Minor health and safety measures, furnace clean and tune, water heater replacement.
- 4. Pressure balancing.
- 5. Furnace replacement/repair.
- 6. Minor repairs that will reduce energy consumption.

## **GROW South Dakota**

104 Ash Street East, Sisseton, SD 57262 605-698-7654, www.growsd.org Fax: 605-698-3038

□ WEATHERIZATION ASSISTANCE PROGRAM□ EMERGENCY FURNACE REPAIR/REPLACEMENT PROGRAM

Mailing Address	City	State	Zip Code	County
Residence Address	City	State	Zip Code	County
Provide Directions - use landmarks				
Home Phone Number	Work phor	ne Number	Cell	ohone Number
			Email addres	

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 4 Digits of Social Security #	Date of	*Race: a=Native American b=Asian c=black d= Hawaiian e=white f=Other g=Mulit-	*Ethnicity a= Hispanic b=Not Hispanic	*Gender M=Male F= Female	Disabled:	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	<b>Military:</b> A=Active b=Veteran	U.S. Citizen: Y=Yes N=No

#### **TELL US ABOUT INCOME & NON-CASH BENEFITS**

Enter GROSS INCOME (amount before deductions) for all Types of Income: \*Wages, \*Self-employment, \*Alimony, \*Social Security, \*SSI, \*SSDI, \*BIA GA, \*EITC, \*TANF, \*Unemployment, \*Worker's Compensation, \*Retirement, \*Pensions, \*Annuities,

			Support, *Net Gambling or Lottery Winnin IEAP; Housing Choice Voucher; Public	igs,
			are Act Subsidy; or Other . FOR ALL	
		easonal Farm Worker; D=une	mployed 6 mo. or less; E=Unemployed	1
more than 6 mo.; f=not in lab				
		C. Semi-Monthly D. Monthly E		
Name	Work Status	Type of Income & Freque	ency Gross Amo	ount
			\$	
			\$	
			\$	
			\$	
			\$	
	TELL U	S ABOUT THE HOME		
1. This is a		6. Is there a proble	em with:	
House: Number of Storie	e123	Plumbing	Roofing	
Built before 1978?		Electrical	Siding	
Age of Home		Heating	Other Please List	
Permanent basement?				
Mobile Home: Serial Nur	nber or Title Number			
Apartment				
O D - · · · · · · · · · · · · · · · · · ·	···· b···· de et the home?	7 Mb-thung of Ci	P	
2. Do you currently own or a		7. What type of Sig		
YesNo If yes purcha	sed from?	Vinyl	Steel	
		Wood	Masonite	
is this a contract for deed?	YesNo	Stucco	Other	_
is the residence for sale?	YesNo			
have homeowners insurance?	YesNo		unhealthy conditions relating to:	
is it located in a flood zone?	YesNo		Paint (home built before 1978)	
		Mold/Mildew	Sewage fumes	
If you own the home, please a	ittach a copy of the real	Asbestos	Chemicals/Smoke Fur	nes
estate tax notice and the deed	to the property.	Other	Not aware of unhealth	y
		<del></del>	conditions	
If rental, Name of Landlord:	•			
Landlord Address:				
Landlord's Phone:				
			eived a forgivable loan or down payme	
3. Is the home currently being	remodeled/ or will be		h another Affordable Housing Project s	uch
within the next 6 months.	YesNo	as, Homes are Po	ssible Inc. (HAPI), Home Ownership	
WILLIII LITE FIERL O INOTILITS.	169100	Assistance Progra	ım (HOAP), Northeast South Dakota	
4 Haratha kama ayar baan y	0 اد دیان د ماله و درست		Program (NESDCAP), Opportunities for	or
4. Has the home ever been \			g (OIL), South Dakota Housing	
YesNo Unsure I		Development Auth	nority (SDHDA) or Sisseton-Wahpeton	
weatherization?		Oyate (SWO)?		
5. The home is heated with:		1 .		
Natural Gas	_Electric Wood		Yes No	
Fuel Oil K	Kerosene Coal			

\_ Propane/Bottled Gas

#### **TELL US ABOUT THE HOME**

<u>Privacy Act Information</u>: 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.

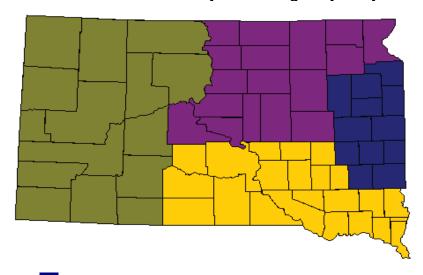
#### By my signature below

- ⇒ 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.

Applicant Signature	Date
Co-Applicant Signature	Date
AGENCY USE ONLY	
Approved by	Date Approved
# in Household Total income	Maximum Allowable Income

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

Counties served: Beadle, Brown, Campbell, Day, Edmunds, Faulk, Hand, Hughes, Hyde, McPherson, Marshall, Potter, Roberts, Spink, Stanley, Sully, Walworth

### 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