



City of Seattle  
Office of Housing  
Gregory J. Nickels, Mayor  
Adrienne E. Quinn, Director



John L. Flynn  
HomeWise Program Manager

## Seattle Office of Housing -- HomeWise Program Weatherization Application Documentation List

Thank you for your interest in the HomeWise weatherization program. Enclosed are the application forms for you to fill out.

- Below is a list of documentation to send with your application.
- Please send copies of all documents that apply to you. Do not send originals.
- All household information that is provided to the HomeWise *program is kept confidential.*

### 1. IDENTIFICATION - Required

- Enter the name, and birth date of **each** household member on the application.

### 2. INCOME DOCUMENTATION - Required for the most current 3 months.

Please include documentation of each of the following income sources that apply to you and all other household members.

#### ***Acceptable documents of proof include:***

- Paycheck stubs (for last 3 months)
- Public Assistance payments: TANF, SSI or unemployment benefits award letter
- Child support income: copy of check or court order
- Pension/retirement income: award letter or W-2
- Social Security: award letter or W-2
- Self-employment income: a year-to-date gross profits less business expenses statement
- Interest earned on bank accounts and investments: bank statement
- If no income, complete the Declaration of No Income Statement on the other side of this page.

If you have any questions, please call 206-684-0244.

Please mail completed application and all required documentation to:

City of Seattle- Office of Housing  
HomeWise Program  
P O Box 94725  
Seattle WA 98124-4725  
Attn: Paula Wolfe

**DECLARATION OF NO INCOME STATEMENT**

I, \_\_\_\_\_, do hereby declare that NEITHER I,  
NOR ANY OF MY HOUSEHOLD, HAS RECEIVED ANY INCOME FOR:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

(fill-in the 3 months prior to the month of application)

I certify that the information contained in this No Income Declaration is complete and accurate to the best of my knowledge. I understand that I am signing this No Income Declaration under penalty of criminal prosecution if I knowingly give false information which results in assistance for which I am not eligible.

My basic living needs (shelter, food and utilities) have been met the last three months by (give a brief explanation of how these needs have been met):

Shelter: \_\_\_\_\_

Food: \_\_\_\_\_

Utilities: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**2009 Income Guidelines  
HOMEWISE Weatherization Program**

**Updated 4/14/09**

Household Size	Electric heat		Gas / Oil	
	Gross Annual Income	Gross Monthly Income	Gross Annual Income	Gross Monthly Income
1	44,800	3,733	24,235	2,019
2	51,200	4,266	31,692	2,641
3	57,600	4,800	37,950	3,162
4	64,000	5,333	42,150	3,512
5	69,100	5,758	45,500	3,791
6	74,250	6,187	48,900	4,075
7	79,350	6,612	52,250	4,354
8	84,500	7,041	55,650	4,630



## HOMEWISE PROGRAM - WEATHERIZATION APPLICATION

**Please Complete & Return with your income documentation copies**

**Name(s):** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip: 981** \_\_\_\_\_  
**Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **Message #:** \_\_\_\_\_

Name(s): List <b>everyone</b> in the household, including children.	Birth Date	Source of Income	Gross Mo. Amt.

Housing Status	Home/Residence Type	Main Heat Source	Account Number
<input type="checkbox"/> Home Owner <input type="checkbox"/> Renter- is your rent subsidized by a Housing Authority, HUD, or Section 8? <input type="checkbox"/> Yes <input type="checkbox"/> No Years at address? _____	<input type="checkbox"/> Single Family - House <input type="checkbox"/> Multi-Family (2,3, or 4) #Units ____ <input type="checkbox"/> Multi-Family (more than 4) #Units ____ <input type="checkbox"/> Mobile Home <input type="checkbox"/> Other _____	<input type="checkbox"/> Electric (Seattle City Light) _____ <input type="checkbox"/> Gas (PSE) _____ <input type="checkbox"/> Oil-Vendor _____ <input type="checkbox"/> Propane-Vendor _____ <input type="checkbox"/> Wood <input type="checkbox"/> Other _____	_____ _____ _____ _____

**(COMPLETE BOTH SIDES)**

Write how many household members are:

0-5 yrs \_\_\_\_\_ 6-17 yrs \_\_\_\_\_ 18-59 yrs \_\_\_\_\_ 60+ yrs \_\_\_\_\_  
Female \_\_\_\_\_ Male \_\_\_\_\_

How many household members have disabilities? \_\_\_\_\_

Is applicant a single female/head of household?  Yes  No

Is this a Hispanic/Latino household? Yes \_\_\_ No \_\_\_

How many household members are:

\_\_\_ American Indian/Alaskan Native (AI/AN)  
\_\_\_ AIAN & Black \_\_\_ AIAN & White  
\_\_\_ Asian \_\_\_ Asian & White  
\_\_\_ Black/African American \_\_\_ Black/African Am. & White  
\_\_\_ Native Hawaiian / Other Pacific Islander  
\_\_\_ Other Multi-racial  
\_\_\_ White

I certify that the information provided is complete and accurate. I understand that I may be subject to criminal prosecution if I have knowingly provided false information. I give my permission for the City to request or release information, including to or from the Seattle Housing Authority, King County Housing Authority, or other government agencies, that may result in my receiving benefits, or be denied City assistance from this request. I authorize the City to enroll me in all assistance programs for which I am eligible.

For state weatherization programs: I understand that I may request a Fair Hearing if the provision of the above information is not acted on to determine my eligibility within a reasonable time or if I do not receive benefits for which I am eligible.

The utility(ies) may release past and future consumption information on my household to OH HomeWise Program. If determined that I am eligible for service, I grant permission to the City of Seattle, its staff and contractors to gain access to this property for audit, installation and inspection purposes. In the case that work requires subsequent inspection from Seattle City Light or the State of Washington, I agree to provide access for these audit purposes.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

When you have completed the application and have all the documentation copies together, please mail it to:

City of Seattle, Office of Housing - HomeWise Program  
P O Box 94725  
Seattle, WA 98124-4725  
Attn: Paula Wolfe