

Project Warm First Line Weatherization Service Application

Name: _____
Address: _____
City: _____ State: ____ Zip: _____

LG&E Account #:
LG&E Account Name:
Relationship to LG&E account holder if not yourself?
Home Phone ()
Work Phone ()
Cell Phone ()

How did you hear about us? (Circle one) family/friend neighbor television ASAP other _____

Do you OWN or RENT your home? (Circle one)

**If you rent, please list property owner's information below:*

Name:	_____
Address:	_____
City, State, zip	_____

Date moved to present residence: (mm/dd/yyyy) ____/____/____

Have you ever had to move because of problems paying your utility bills? **Yes No** (Circle one)

Has this household received **LIHEAP benefits** in the past year? **Yes No** (Circle one)

How many people live in this household? _____ List all names and information below:

First Name,	Last Name	Gender	Date of Birth	Monthly Income	Source of Income	Disabled? Y/N
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		

PLEASE SIGN AND DATE BACK PAGE

I UNDERSTAND THAT IN CONSIDERATION OF SERVICES BEING PROVIDED AT MY RESIDENCE, I CERTIFY THAT THE INFORMATION I HAVE PROVIDED IS CORRECT. I AUTHORIZE PROJECT WARM TO:

1. Perform necessary conservation measures appropriate to make my home more energy efficient. I release Project Warm from responsibility for any damage to my home in connection with testing and from performing weatherization work in my home.
2. Authorize other individuals and contractors, if needed, to make repairs and/or replacements to items that may present health and safety issues.
3. Authorize LG&E to release all records regarding my customer services account to Project Warm including but not limited to the following: payment records, usage data, EMPP estimates, meter reading dates, service disconnection data, arrearage, billing due dates, billing amounts, partial payment agreements for both gas and electric usage.
4. I further release LG&E from any liability whatsoever arising out of release of this information and agree to hold LG&E harmless from all claims that may arise out of this release.
5. I certify that the person receiving the services currently resides at the above described premises.
6. I certify that the person receiving the services will keep all scheduled appointments and otherwise comply with the agreement.

Please use this space if you have additional instructions that will help us find your home

Customer Signature

Date

LG&E Account Name Signature (if different from Customer signature) Date