



Urban League of Greater Oklahoma City, Inc.

**Weatherization Application**

**All applicants must provide proof that the property is being serviced by OG+E**

Applicant Head of Household Information					
Full Name:				Date:	
	<i>Last</i>	<i>First</i>	<i>M.I.</i>		
Address:					
	<i>Street Address</i>			<i>Apartment/Unit #</i>	
	<i>City</i>			<i>State</i>	<i>ZIP Code</i>
Phone:	( )	E-mail Address:			
Best time to call: Mornings / Nights			Alternative Phone:		
Social Security Number - -	Are you Disabled?		Annual: Household Income \$	Occupation: _____	Date of Birth _____
	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Do you currently receive any of the following assistance?	<input type="checkbox"/> TANF <input type="checkbox"/> Sooner Care <input type="checkbox"/> LIHEAP <input type="checkbox"/> Disability		<input type="checkbox"/> Soc Security <input type="checkbox"/> SSI <input type="checkbox"/> Food Stamps	<input type="checkbox"/> Unemployment <input type="checkbox"/> Child Support <input type="checkbox"/> Alimony	
Relationship status: Are you	Married? <input type="checkbox"/>	Single? <input type="checkbox"/>	Divorced? <input type="checkbox"/>	Separated? <input type="checkbox"/>	
Ethnicity:	African American <input type="checkbox"/>	Asian <input type="checkbox"/>	Caucasian <input type="checkbox"/>	Latino <input type="checkbox"/>	Other <input type="checkbox"/>
Utility Information					
Natural Gas or Propane provider?				How much do you pay monthly on heating / cooling your house? \$	
Can you provide a copy of the deed to the house for which you are seeking assistance? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Do you own (or have written) permission of the owner?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Landlord's name:		
Have you lived at your current residence for more than 12 months or more?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Landlord's phone:		
Have you previously received weatherization services from OG&E?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?		
Have you ever applied for weatherization services and were denied?	If yes, explain				

**All Information must be filled out completely. Please place N/A in space provided if information does not apply.**

Housing Characteristics			
Owners Name / Landlords Name:		Address:	
Year House Built:			
Type of House:	Ranch <input type="checkbox"/>		
	Single story <input type="checkbox"/>	2 story <input type="checkbox"/>	Duplex <input type="checkbox"/> Condo <input type="checkbox"/> Townhome <input type="checkbox"/> Fourplex <input type="checkbox"/> Other <input type="checkbox"/>
Exterior materials:		Brick <input type="checkbox"/> Stucco <input type="checkbox"/> Vinyl <input type="checkbox"/> Aluminum <input type="checkbox"/> Other <input type="checkbox"/>	
Stove:		Gas <input type="checkbox"/> Propane <input type="checkbox"/> Electric <input type="checkbox"/> Other <input type="checkbox"/>	
Water heater:		Gas <input type="checkbox"/> Propane <input type="checkbox"/> Electric <input type="checkbox"/> Other <input type="checkbox"/>	

Household members					
<i>Please list all members of household</i>					
Full Name	Birth Date	Age	Relation to Applicant	Single Married Divorced Separated	Income and Source
					Please list

**Disclaimer and Signature**

*I We certify that the information given to the Urban League of Greater Oklahoma City on this application is accurate and complete to the best of my knowledge and belief. I We understand that false statements or information is punishable under Federal Law. I We also understand that providing false statements or information is grounds for denial of assistance under this program.*

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

**All Information must be filled out completely. Please place N/A in space provided if information does not apply.**



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