



# **ENERGY CONSERVATION APPLICATION**

**PLEASE INCLUDE COPY OF :**

☐ **GAS BILL** ☐ **ELECTRIC BILL** ☐ **WATER BILL**  
☐ **PROOF OF INCOME** ☐ **PROOF OF HOMEOWNERSHIP**



Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Work phone: \_\_\_\_\_  
Apt: \_\_\_\_\_ Other phone: \_\_\_\_\_  
City, Zip: \_\_\_\_\_ Ward: \_\_\_\_\_

Gas Account Number: \_\_\_\_\_

Electric Account Number: \_\_\_\_\_

Water Account Number: \_\_\_\_\_

☐ **CEI  
Illuminating Co.**  
☐ **CPP  
Cleveland Public  
Power**

Do you own your home or rent? ☐ **OWN** ☐ **RENT** Any Handicapped person in household? ☐ **YES** ☐ **NO**  
Is this a single or multi-family home? ☐ **SINGLE** ☐ **MULTI-FAMILY**  
If multi-family, how many apartments in the building? \_\_\_\_ Are you now in the PIP Program? ☐ **YES** ☐ **NO**  
Have you received HEAP assistance in past 12 months? ☐ **YES** ☐ **NO**  
Has your home ever been insulated or your heating system replaced through any Weatherization Assistance Program?  
☐ **YES** ☐ **NO** If yes, which agency and when? \_\_\_\_\_

**List all persons who live in your home, including yourself:**

NAME	AGE	NAME	AGE

**Total Gross annual income (include all income in household for all household members over the age of 18 yrs.)**  
\$ \_\_\_\_\_ **YOU MUST INCLUDE PROOF OF INCOME. IF YOU DO NOT HAVE INCOME A ZERO INCOME STATEMENT MUST BE WRITTEN AND NOTERIZED!! YOU MUST INCLUDE PROOF OF HOME OWNERSHIP (i.e. copy of tax bill, mortgage statement or deed)**

*I certify that the information given by me in this application is true to the best of my knowledge and I understand that this information is subject to verification. I understand that by signing this application, I authorize Cleveland Housing Network, its representative or designees to inspect and evaluate services provided to me, and to use any information provided on this form for that purpose. I understand that all work will be completed at no charge to my family or to myself.*

**Applicant signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Return completed application to the address provided on the back**

**TO AVOID ANY DELAYS....**

Please return ALL paperwork to:

*Cleveland Housing Network*

*2999 Payne Avenue*

*Cleveland, OH 44114*

*ATTN: Jessica Ingram (216) 774-2396*

*Fax number: 216-881-5329*

***\*\*APPLICATIONS CAN ALSO BE FAXED\*\****

***PLEASE NOTE NOTARIZED DOCUMENTS CANNOT  
BE FAXED MUST HAVE ORIGINAL***

**APP. MAILED DATE**

**RELEASE DATE & TIME**

**CONTRACTOR**

**WPC (Sewer Repair)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLUMBING REPR.**

\_\_\_\_\_

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\_\_\_\_\_

**ELEC./WATER CONS.**

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**Notes/Comments (ALL PROGRAMS)**

**PLEASE LIST ALL REPAIRS THAT ARE NEEDED!!!!**

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