Weatherization Waiver Request

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Client Name:					
Address:	For Sale (w/in 6 Months)/Foreclosure Yes No				
Site ID #:			Previously Wxed	Yes No	
Owner Occupied: Yes No			Ownership Verifie	d Yes No	
Contact Person in Assessor's Office:			Phone	#:	
Type of Dwelling:				Type of Fuel:	
Single Two Family	Duplex	Three Family	Mobile Home		
Heating System Replacement	Boiler [Furnace	Other:	
Hot Water Heater Replacement	Gas [Oil	Electric	
Above Ground Oil Tank Replacement	Nu	mber of Gallons:			
Est. Total Materials \$	Heating Sys	tem	Notes:		
Est. Total Labor \$	Heating Sys	tem			
Est. Total Materials \$	DOE				
Est. Total Labor \$	DOE				
Est. Total Materials \$	Utility				
Est. Total Labor \$	Utility				
Est. Total Materials \$	Other:				
Est. Total Labor \$	Other:				
Reason for Replacement(s):					
Supporting Documents Checklist (Pleas	se provide pri	ntouts for each of th	ne following):		
BWR			Contractor's Quot	te #1/Proposal	
CTT/Burner Combustion Efficiency Report			Contractor's Quote #2/Proposal		
*Heating System-Contractor Agreement			Photos of Current Heating System		
			Energy Star Verifi	cation	
*NEW VENDORS ONLY	(also include	Contractor's Licens	e and Liability Insu	rance)	
Submitted By:					
Weatherization Coord	inator Signatu	ıre	Agency	Date	
This Request is: Approved Comments/Conditions:		☐ Disapproved	İ		
Project Manager Weatherization Assistance Program			Date		

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performance and delivery):	be furnished, federal prodi	ct specifications, and	time for	
Criteria on which price, geographic location, delivery time etc.	offers will be evaluated:			
Name of Vendor / Contractor #1:				
Date of Inspection:	Person Spoken to:			
Price / Rate Quoted and any other specifics of offer:	Material	\$		
,	Labor	\$		
	Total Cost	\$		
Name of Vendor / Contractor #2:				
Date of Inspection:	Person Spoken	to:		
Price / Rate Quoted and any other specifics of offer:	Material	\$		
	Labor	\$		
	Total Cost	\$		
Name of Vendor / Contractor #3:				
Date of Inspection:	Person Spoken	to:		
Price / Rate Quoted and any other specifics of offer:	Material	\$		
	Labor	\$		
	Total Cost	\$		
Name of Caller from the Agency:				
Date of call to Vendor #1:	Person Spoken	to:		
Date of call to Vendor #2:	Person Spoken			
Date of call to Vendor #3:	Person Spoken			
Date form completed:				
Contract Awarded to:				
Reason:				