

HOME WEATHERIZATION SERVICES

2022 Application Packet



This packet contains all the documents necessary to apply for weatherization improvements by The Sustainability Institute's Environmental Conservation Corps (ECC) Program.

Completion of all forms is required in order for your application to be processed.

Questions?

Please contact the Sustainability Institute at: (843) 529-3421 or
via email at Info@SustainabilityInstituteSC.org.

Note:

The ECC Program was renamed the "Environmental Conservation Corps" in Fall 2020 to reflect the expanded scope of work.



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PROGRAM PURPOSE

To assist low- to moderate-income homeowners by providing weatherization improvements to their primary residence in order to reduce energy expenses and mitigate human-generated climate change.

ELIGIBILITY FOR PROGRAM PARTICIPATION

Property Requirements

- 1.) Proof of ownership, including:
 - Mortgage statements
 - Recorded deeds
 - Tax bills and receipts including the applicant's name
 - Homeowner's insurance policies with the applicant's name
 - Valid South Carolina license or government-issued ID

Note: Contract for deeds and contract for sales are not acceptable forms of proof of ownership.

- 2.) All property taxes and mortgage payments must be current.
- 3.) Proof of flood insurance must also be provided if the home is in a flood zone.

* Unfortunately, we are NOT able to work on mobile homes/trailers at this time. *

Income Requirements (See page 6.)

- 1.) Applicants must document all sources of income for all members of the household over the age of eighteen (18).
- 2.) Household income may not exceed 80% of the area median income as adjusted for household size.

2021 Income Chart

Note: Charleston County is part of the Charleston-North Charleston, South Carolina (SC) MSA, which includes the following SC Counties: Berkeley, Charleston, and Dorchester.

Charleston-North Charleston, South Carolina MSA (\$)									
Median Income	FY 2021 Income Limit Category	Persons in Family							
		1	2	3	4	5	6	7	8
\$82,100	Extremely Low Income Limits	17,300	19,750	22,200	26,500	31,040	35,580	40,120	44,660
	Very Low Income Limits (50%)	28,750	32,850	36,950	41,050	44,350	47,650	50,950	54,200
	Low Income Limits (80%)	46,000	52,600	59,150	65,700	71,000	76,250	81,500	86,750

Source: United States Department of Housing and Urban Development (HUD).

<https://www.huduser.gov/portal/datasets/il/il2020/2020summary.odn>. Accessed 11 January 2022.

SCOPE OF WEATHERIZATION SERVICES

During the initial and final assessments, we may employ the following tests to identify key issues and evaluate the work performed as per the approved scope of work:

- | | |
|---------------------|-------------------------------------|
| 1.) Blower door | 4.) Energy use calculations |
| 2.) Duct leakage | 5.) Combustion Appliance Zone (CAZ) |
| 3.) Thermal imaging | |

We do provide the following services:

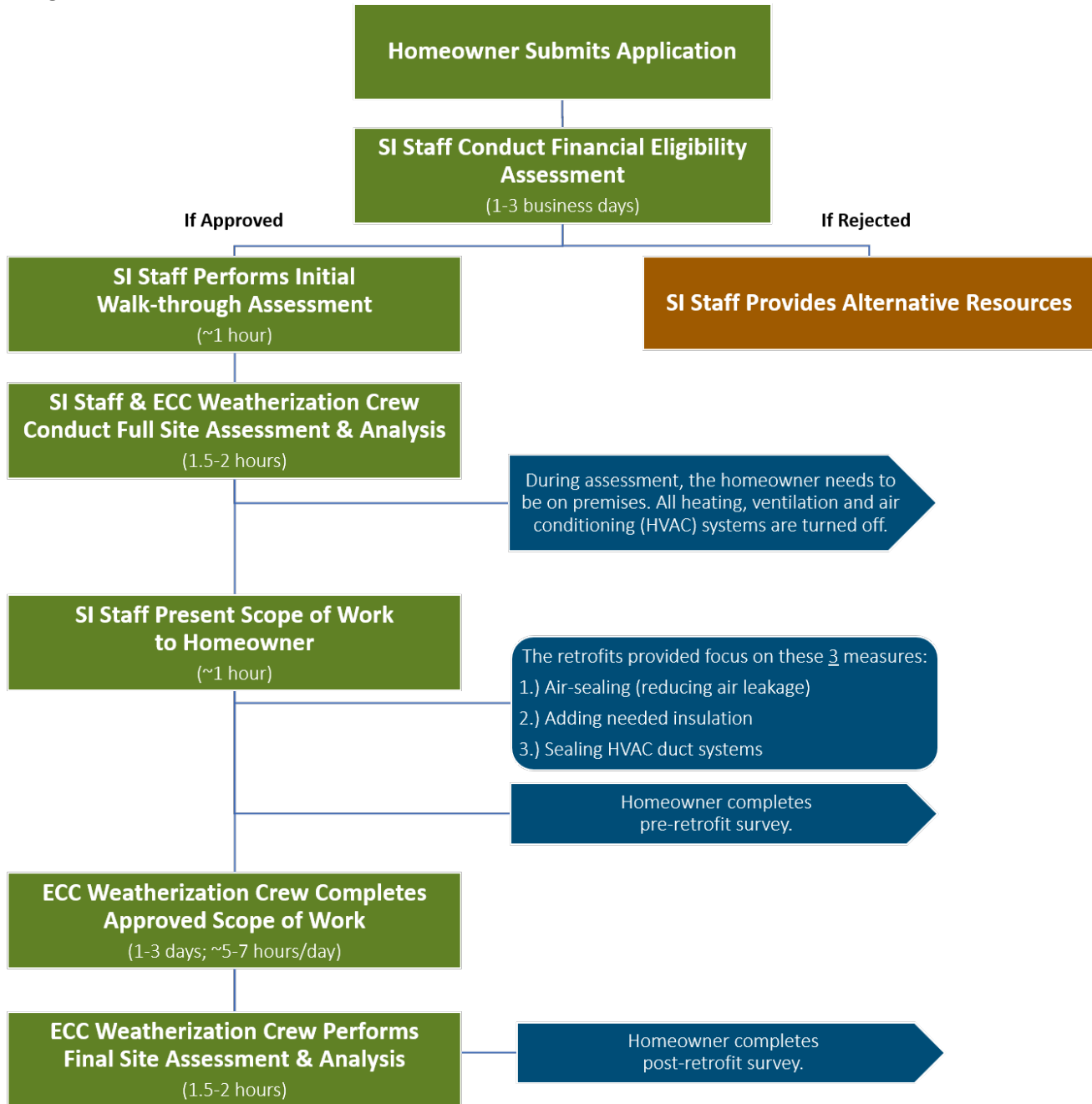
- | | |
|--|--|
| 1.) Air-sealing (air leakage reduction) | 5.) Low-flow water conservation devices |
| 2.) Insulation installation | 6.) Hot water pipe insulation installation |
| 3.) HVAC duct systems sealing | 7.) Attic hatch tent installation |
| 4.) (Programmable) Thermostat installation | |

At this time, we do NOT provide the following services:

- | | |
|----------------|---------------------------------|
| 1.) Electrical | 5.) Structural |
| 2.) Flooring | 6.) HVAC mechanical |
| 3.) Roofing | 7.) Door and window replacement |
| 4.) Plumbing | |

HOME RETROFIT/WEATHERIZATION PROCESS

The consideration and implementation process for the home retrofit/weatherization service is captured in the flow diagram below.



REQUIRED FORMS & OTHER DOCUMENTATION

The forms and support documentation required to participate in this program are outlined below.

*** ETHNICITY & RACE:**

Input abbreviations in the table above for each household member based on the following information.

Ethnicity: Place the letter “H” next to those who identify as Hispanic or “N” for Non-Hispanic.

Race: Place one of the numbers 1-10 (shown below) to indicate how each member of the household identifies.

- | | |
|--|---|
| 1.) Black/African American | 7.) Asian & White |
| 2.) White | 8.) Black/African American & White |
| 3.) Asian | 9.) American Indian/Alaskan Native & Black/African American |
| 4.) Indigenous North American/Alaskan Native | 10.) Other/Multi-racial |
| 5.) Native Hawaiian/Other Pacific Islander | |
| 6.) American Indian/Alaska Native & White | |

**** INCOME SOURCE(S):** Input abbreviations in the table above. Include support documentation/source copies for each listed income source.

Income Type/ Source	**	Support Documentation (Example of Source Copy)
No income	N/A	N/A
Social Security	SS	Copy of most recent SSA annual benefits statement/ award letter
Supplemental Security Income	SSI	
Retirement/Pensions Income	RI	
Disability Income	DI	
Public Assistance	PA	
Annuity Income	AI	Copies of TWO most recent check stubs
Part-time Employment	PTE	
Full-time Employment	FTE	

Income Type/ Source	**	Support Documentation (Example of Source Copy)
Self-employed	SE	Copy of most recent tax forms filed with IRS
Unemployment	UI	Copy of statement or letter showing benefits or copy of recent checks for 4 weeks
Reverse Mortgage Income	RMI	
Alimony	A	
Child Support	CS	
Other income	OI	List type and source above



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Home Weatherization Service Application

Homeowner Name(s): _____

Date of Application Preparation: _____

Property Information

Address: _____

City: _____ State: _____ Zip: _____

Year Built: _____ # Bedrooms: _____

Primary Contact Information

Name: _____

Email: _____

Preferred Phone #: _____

Alternate Phone #: _____

Monthly Utility Bills

(averaged over 12 months)

Gas: \$ _____

Water: \$ _____

Electricity: \$ _____

Head of Household Information

Is this person employed? YES NO

If yes, where and for how long? _____

Household Composition and Income Certification

Note: All persons who intend to occupy the housing unit and their anticipated incomes must be listed below. List additional household members on a separate sheet of paper. Attach documentation of ownership for all owners.

	Occupant Name (First & Last Names)	Relationship to Owner	Date of Birth	Gender	Ethnicity/ Race*	Anticipated Annual Income	Income Source(s)**
1						\$	
2						\$	
3						\$	
4						\$	
5						\$	
6						\$	

TOTAL ANTICIPATED ANNUAL HOUSEHOLD INCOME: \$ _____



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Certification of Occupancy

Property Street Address: _____

City: _____ State: _____ Zip Code: _____

I, _____, hereby certify that the above-referenced address is my principal residence and that I own this home. I further certify that the below-referenced and hereto attached documentation is valid proof of occupancy. I understand that any discrepancies found later may be grounds for disqualification.

Recent utility bill

Unexpired South Carolina driver's license or government-issued ID card

Other: _____

Homeowner #1

Printed Name

Signature

Date

Homeowner #2

Printed Name

Signature

Date



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Homeowner Acknowledgement & Certification

The submission of my application to this program confirms that I agree to all conditions outlined above and that I will allow the Environmental Conservation Corps access to my home for all necessary appointments required to complete the work satisfactorily.

I agree that the household income, household composition, and other eligibility requirements shall be conditions of this occupancy and that failure or refusal to comply with a request for information with respect thereto shall be deemed a violation of conditions.

I have no objection to inquiries made in verifying the information contained in this application.

I have provided verification of all anticipated annual income and other information necessary to satisfy the requirements for occupancy for each person named herein. I will assist in obtaining any additional information or documents required in verifying the statements certified herein.

I certify that the statements and all information herein are true and complete to the best of my knowledge and are given under the penalty of perjury.

I understand that this is not a contract and does not bind either party.

Homeowner #1

Printed Name

Signature

Date

Homeowner #2

Printed Name

Signature

Date



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U.S. Military Service Veterans

Are you (the homeowner) or someone in your household a U.S. Military Service Veteran?

YES NO

If “yes,” indicate applicable person’s name, military service branch, and military service year(s):

If you, or a member of your household, served in the National Guard or Reserves, was any part of the service considered Active Duty?

YES NO Not applicable (n/a)

Did the U.S. Military Service Veteran receive an Honorable Discharge?

YES NO

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Return the completed application packet by email to: Info@SustainabilityInstituteSC.org OR by mail to:

**Environmental Conservation Corps
The Sustainability Institute
1850 Truxtun Avenue, Suite 200
North Charleston, SC 29405**

***** Sustainability Institute Use Only *****

Income Certified by: _____

TMS #: _____

Flood Map #: _____

Zone: _____