

Maine State Housing Authority (MaineHousing)
 WEATHERIZATION ASSISTANCE PROGRAM (WAP)
FORM BUNDLE COVER SHEET

INSTRUCTIONS: Complete this Cover Sheet to auto-populate the forms. Use Adobe's bookmark navigation feature to view forms in the bundle. *Tip: Print the entire bundle or right click on the form name in the bookmarked list to print individual forms.*
NOTE: The web site is not designed to retain data. Save form(s) to your computer-network before populating. Do not save blank forms on your computer for future use; download blank forms from the web site to ensure that you are using the most current version. *Tip: Save the website to your browser favorite's bar for quick access.*

PRIMARY APPLICANT	
First Name	_____ MI _____
Last Name	_____
Mailing Address	_____
City	_____
State	_____ Zip _____
Telephone	_____
Email	_____

OWNER (if different than Applicant)	
First Name	_____ MI _____
Last Name	_____
Company	_____
Mailing Address	_____
City	_____
State	_____ Zip _____
Telephone	_____

PHYSICAL ADDRESS (PROPERTY)	
Property Street	_____
Property City	_____
Property State	_____ Zip _____

COMMUNITY ACTION AGENCY (CAA)	
CAA Name	_____
Mailing Address	_____
City	_____
State	_____ Zip _____
Telephone	_____

PROJECT	
Work Order #	_____
Work Order Issue Date	_____
Completion Date	_____
Project Cost	\$ _____

Representative Name	_____
Representative Telephone	_____
Representative Email	_____
Technician Name	_____
Technician Telephone	_____
Technician Email	_____
Inspector Name	_____
Inspector Telephone	_____
Inspector Email	_____

CONTRACTOR (CREW)	
Contractor Name	_____
Mailing Address	_____
City	_____
State	_____ Zip _____
Representative Name	_____
Telephone	_____
Email	_____
Technician Name	_____

COMMENTS

PROJECT DOCUMENTS REQUIRED BY MAINEHOUSING

Use this checklist to indicate which of the following final/signed documents have been uploaded to HEAT Enterprise.

- | | |
|--|--|
| <input type="checkbox"/> Consent Form | <input type="checkbox"/> Deferral of Services Notice (if applicable) |
| <input type="checkbox"/> Proof of Ownership | <input type="checkbox"/> Approved Waiver(s) (if applicable) |
| <input type="checkbox"/> Power Source Signoff | |
| <input type="checkbox"/> Final Ventilation Checklist (ASHRAE) | |
| <input type="checkbox"/> Inspection Completion | |
| <input type="checkbox"/> Thermal Barrier Application (if applicable) | |
| <input type="checkbox"/> Contractor Proposal/Cost Estimate | |
| <input type="checkbox"/> Contractor Invoice | |
| <input type="checkbox"/> Contractor Release of Liens | |
| <input type="checkbox"/> Pre & Post Photographs (if applicable) | |
| <input type="checkbox"/> Rental Agreement (if applicable) | |

- Appliance Repair/Replacements must also include the following:**
- Appliance Replacement Consent
 - Photograph of existing appliance with tag
 - Appliance vendor invoice for delivery, install and/or repair
 - Technician Evaluation
 - Documentation verifying energy source for appliance
 - Documentation verifying delivery/install instructions (with client signature)