



Dear Applicant:

The purpose of this organization, W.A.R.M., is to assist residents of the Rangely School District boundaries with their utilities such as gas, water, electric, firewood, and sewer bills during the months of November, December, January, February, March, and April and provide emergency assistance if warranted during other months. The organization shall not discriminate with regard to sex, race, religion, age, or national origin. All sections of the W.A.R.M. application must be fully completed and the applicant must also apply for LEAP.

Along with the above, additional criteria is needed for the application to be considered:

1. The applicant must be unable to pay utilities.
2. The applicant must be the name in which the utilities are under or otherwise prove that they are responsible for payment of the utilities (acceptable documents would be a rental agreement or letter from landlord with their contact information).
3. The applicant must be living at the address where the assistance will be provided at the date of the application.
4. Please provide copies of the utility bill(s) in which you are requesting assistance with.
5. Please provide proof of a payment plan for the utilities in which you are requesting assistance with.

The Board will have the final decision on approval of the application.

Sincerely,

W.A.R.M. Board Members



W.A.R.M.
UTILITY ASSISTANCE APPLICATION

Form with fields for: LAST NAME, FIRST NAME, PHYSICAL ADDRESS, MAILING ADDRESS, CITY, STATE, ZIP, HOME PHONE, WORK PHONE, DRIVER'S LICENSE #, DRIVER'S LICENSE ISSUE STATE, UTILITY ACCOUNT NUMBER(S), INCOME sources, MONTHLY HOUSEHOLD INCOME RANGE OF ABOVE, DATE OF BIRTH, GENDER, ETHNICITY, ARE ADULTS IN HOUSEHOLD DISABLED?, # OF SENIORS IN HOUSEHOLD, NUMBER IN HOUSEHOLD, DO YOU RENT OR OWN THE PROPERTY, HOUSING TYPE, FUEL TYPE, LEAP APPLICATION STATUS, AMOUNT REQUESTING FROM W.A.R.M.

**W.A.R.M.
CONFIDENTIALITY AGREEMENT**

The following is a confidentiality agreement to allow W.A.R.M. staff and Energy Outreach Colorado to share with other agencies whatever essential information about your case that might be helpful in getting resource to meet your personal needs. Any information will be given without decimation and with discretion for your rights. I hereby give my permission to any duly authorized representative of W.A.R.M. and Energy Outreach Colorado to supply information to or request information from other persons, agencies, or institutions pertaining to me or my family. I release W.A.R.M. and Energy Outreach Colorado of any and all liability for supplying or requesting such information. This shall be in effect until I state in writing that it is no longer valid.

Client Name

Signature of Client

Date

Notes:

Applications that are not complete will be returned to the client and will not be considered in the current month's meeting.





W.A.R.M.
PRE-ASSISTANCE SURVEY

1. What type of energy assistance have you received in the past (please check all that apply)?
 - W.A.R.M.
 - LEAP
 - Weatherization
 - Other (please list)
 - None

2. If you checked anything other than "None" above, when was the last time you received it?
_____ Month
_____ Year

3. What life circumstances have led you to request assistance from W.A.R.M. (please check all that apply)?
 - Job loss or layoff
 - Illness
 - Injury
 - Increased utility expenses
 - Increased family/household expenses
 - Increased family/household size
 - Increased medical expenses
 - Monthly living expenses exceeded monthly income
 - Other one time expense(s)

4. What type of hardships would you and your family/household face if you did not receive this assistance?
 - Not able to pay utility bill
 - Not able to buy food
 - Not able to afford healthcare and/or medicine
 - Not able to pay rent or mortgage
 - Not able to pay for fuel and/or other transportation expenses (car repair, ect.)
 - Not able to pay other bills

5. During the past three months, how often were able to purchase living necessities (medicine, food, ect.)?
 - Always
 - Frequently
 - Sometimes
 - Seldom
 - Never

6. Which of the following would you say describes your home now?
 - Not warm and comfortable at all
 - Somewhat warm and comfortable
 - Warm and comfortable
 - Very warm and comfortable

7. How did you hear of the WARM program?
 - Town of Rangely
 - Word of mouth
 - Filer/newspaper
 - Other, please list: