WEATHERIZATION ASSISTANCE PROGRAM
APPLICANT NOTIFICATION OF DEFERRAL

CLIENT NAME: _____

CLIENT ADDRESS: _____

_____

Dear _____

Based on information gained during the energy audit of your residence on _____ your application for the Weatherization Assistance Program has been deferred for the following reason(s):

_____ Excessive Mold or Moisture

_____ Excessive CO levels exceeding the scope of Weatherization

_____ Sewage or sanitary issues at the home present a danger to agency employees and contractors

_____ Performing work would endanger the condition of residents

_____ Building structure, electrical system, plumbing system, or mechanical systems prohibit effective, durable Weatherization from being completed

_____ Drug abuse or other criminal activity taking place at client's residence

_____ Extent and condition of lead-based paint in the home would potentially further health and safety issues

_____ Client is either threatening, abusive, or uncooperative to crew, contractors, auditors, or program management who must work on or visit the home

_____ The following other reason for deferral: _____

_____ Weatherization may continue if the following conditions are met: _____

Agency staff check one of the following:

_____ It is the client's responsibility to meet these conditions and notify this agency for weatherization to proceed.

_____ The agency takes responsibility for meeting these conditions.

APPEAL RIGHTS: Please be advised that if you do not agree with the reason(s) that you were denied, you may appeal within ten (10) business days. Appeal by contacting the agency director who will respond to you in writing:

Housing Director
1416 West 9th Street, Owensboro, KY 42301
(270) 686-1624

If your appeal is not resolved to your satisfaction by the local agency you may then appeal to the State of Kentucky by writing to:

Community Action of Kentucky
Weatherization Program Administrator
101 Burch Court, Frankfort, KY 40601
(502) 875-5863

IF YOU APPEAL THE WEATHERIZATION ASSISTANCE PROGRAM DETERMINATION, YOU MAY BE REQUIRED TO PROVIDE ADDITIONAL INFORMATION FOR YOUR APPEAL.

The reason(s) for deferral have been explained to me. _____ Date: _____

Client Signature