



Weatherization Client Questionnaire

Agency:

- BVCAP
 CAPLSC
 CAPMN
 CNCAP
 NENCAP
 NWCAP
 SENCA

Inspector Name:	Date:	Job Number:
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Client Name & Address:	City:	Phone Number:
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INSPECTION REQUIREMENTS

Question	Yes	No	Remarks
1. Does your home have broken glass in windows and doors?			
2. Does your home have foundation problems?			
3. Do you have a basement or a crawl space?			
4. Is the outside of your home free of debris so that a contractor could work on your home?			
5. Does your roof leak or is there physical damage to the inside from a roof leak?			
6. Is the access to windows, doors, attic etc. free on the inside of your home?			
7. Are you in the process of remodeling or do you plan on remodeling your home in the near future?			
8. Are any parts of your ceilings, walls or floors incomplete or in need of repairs?			
9. Do you have any broken or leaking water or sewer lines?			
10. Does water leak/stand in the basement or crawlspace?			
11. If mobile home, is the underbelly free of debris and/or standing water?			
12. Have you noticed mold/mildew growing on windows, walls or in corners?			
13. Do you use your attic for storage?			
14. Does your furnace work?			
15. Are any utilities turned off by the utility companies?			
16. Do you have pets in the house?			
17. Do you have any type of wood, pellet, corn stove, or fire place?			
18. Is the home listed for sale or do you have any knowledge of Federal, State, or Local program designation of your home for acquisition or clearance?			

BUILDING DETAILS

19. Water heater:	Gas	Electric	23. Cooling system:	Central Air	Window A/C
20. Cook stove:	Gas	Electric	24. If window air conditioning is used, how many do you have?		
21. Do you have a:	Breaker	Fuse box		1	2
				3	4
22. Heating system:					
Forced Air	Steam	Water Boiler			Vented Console
Wall Furnace	Wood Stove	Electric Baseboard			Unvented Heater

SIGNATURES

Sign Here _____

Client Signature

Date

Weatherization Representative

Date

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