DEFERRAL FORM

Client name: ____________________________  Client HH#: ____________________________

Although your household was determined eligible for the Weatherization Assistance Program, there are situations or conditions where weatherization services must be deferred until conditions can be resolved. This does not mean that weatherization services will never be available, but that work must be postponed until the problems can be resolved. **Due to the following conditions, work cannot proceed until the issues identified have been resolved:**

___ 1. The building structure or its mechanical systems, including electrical and plumbing, are in such a state of disrepair that failure may be imminent.

___ 2. The house has sewage or other sanitary problems that would further endanger the occupants and/or workers if weatherization work were performed.

___ 3. The house has been condemned or electrical, heating, plumbing or other equipment has been “red tagged” by local or state building officials or utilities that cannot be resolved through weatherization.

___ 4. Moisture problems are severe (see attached Mold & Moisture Assessment).

___ 5. Dangerous conditions exist due to high carbon monoxide levels in combustion appliances.

___ 6. The extent and condition of lead-based paint in the house would potentially create further health and safety hazards.

___ 7. There is an excessive amount of clutter, garbage, hazardous materials, pests and/or animal feces in areas where contractors/crews/agency staff must have access to in order to perform weatherization work.

___ 8. Remodeling work is in progress and must be completed prior to the start of any weatherization work.

___ 9. Evidence that vermiculite insulation is present which is presumed to contain asbestos, or, evidence that vermiculite insulation contains asbestos (see attached test results)

___ 10. There is an inaccessible crawlspace in the dwelling

___ 11. Other: __________________________________________

By signing below, I acknowledge that I have been notified as to the situation or condition that has caused the Service Provider to defer work on my home. The Service Provider has clearly explained to me why the work was deferred and what changes need to occur before weatherization can begin/continue.

I will contact the Service Provider once the above work has been completed or the issue has been resolved. When I contact the Service Provider, I understand that I may be required to provide documentation of proof of resolution and that I must still be income eligible. If I am no longer eligible for the program, my home cannot be weatherized.

_________________________________________  Date

Client Signature (if the client is available)  
_________________________________________  Date

Service Provider Representative Signature (required)  
_________________________________________  Date

Minnesota Weatherization Assistance Program  Revised July 2015