The above listed participant’s home is scheduled to receive weatherization. During the energy audit while performing weatherization work, it was discovered the above mentioned home has a health and/or safety condition present. The health and/or safety condition must be addressed by the home owner or landlord before any weatherization work can begin/resume. To receive further weatherization assistance, the eligible occupant must notify the weatherization program when the health and/or safety conditions checked below have been addressed. The agency has the right to inspect and/or have a representative inspect all health and/or safety work before weatherization can begin/resume.

Conditions checked below were noted on _______________.

- Standing water, mold, friable asbestos, deteriorated lead-based paint surfaces or other hazardous materials beyond the scope of the program.
- Evidence of infestations of rodents, insects, and/or other vermin.
- Unsecured pets that may prevent workers from safely completing their work.
- The presence of sewage or animal feces in the home.
- Improperly stored chemicals, combustible materials, or other fire hazards that present a danger to the occupants or the workers.
- Maintenance or housekeeping practices that limit the access of workers to the dwelling or create an unhealthy work environment.
- Major remodeling is in progress, which limits the proper completion of major weatherization measures.
- The home receives HUD funding and at the time of completion, the unit will not meet applicable HUD Lead-Based Paint standards.
- Electrical or plumbing hazards or structural failures that cannot be addressed as a part of weatherization.
- Threat(s) of violence or abusive behavior to worker(s) or household member(s) during the weatherization process.
- Any condition present in the dwelling that threatens the safety of the crew or contractor.
- Occupant has known health conditions that prohibit the installation of insulation or other weatherization materials.
- Other: __________________________

I ________________________________ have read and understand the Health and/or Safety Agreement and understand the aforementioned health and/or safety items are my responsibility. I also understand that once the health and/or safety measures listed above are addressed weatherization can begin/resume. Please note your eligibility for weatherization services lapses on ______________. If you have not re-contacted us by then, your audit may be closed out and you may have to reapply for the weatherization program. I have read the aforementioned list of conditions and special instructions.

(Eligible Occupant’s Name) ________________________________

(I have read) ________________________________

(Home Owner’s or Landlord’s Signature) ________________________________

(Date) _______________