

CITY OF COLUMBIA  
HOME INSULATION AND WEATHERIZATION PROGRAM  
APPLICATION AND PARTICIPATION AGREEMENT  
**FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY LAW.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you own your own home?\* Yes No

\*At this time, the Program is only available for residential, owner-occupied homes located in the City of Columbia.

Is your household income at or below 300% of the Federal Poverty Guidelines (see chart below)?\*\* Yes No

\*\* Additional verification of income eligibility may be required

Persons in family/household	Monthly income limit	Annual income limit
1	\$3,645	\$43,740
2	\$4,930	\$59,160
3	\$6,215	\$74,580
4	\$7,500	\$90,000
5	\$8,785	\$105,420
6	\$10,070	\$120,840
7	\$11,355	\$136,260
8	\$12,640	\$151,680

Are you a City of Columbia Electric Customer? Yes No

Are you or any occupants employed by the City of Columbia? Yes No

Was your home constructed prior to 1978? Yes No

Was your home constructed prior to 1950? Yes No

Does your home have knob and tube wiring? Yes No Not Sure

Does your home have a basement? Yes No

Does your home have a crawl space? Yes No

Does your home have an attic access? Yes No

## APPLICANT'S CONSENT AND HOLD HARMLESS AGREEMENT

If selected for the program, I hereby agree:

1. **Consent:** On scheduled dates, I consent that city staff and contractors may enter my home and property to install and inspect insulation and weatherization projects and to verify that the work is completed.
2. **Scope of Work:** The scope of work may include the installation of blown insulation in the attic of my home and other places as noted in the approval letter. It may also include additional weatherization projects, provided that the total cost of the work does not exceed the amount authorized by the City in writing.
3. **Verification of Completion of Work:** I will notify the City that the work has been completed to my satisfaction by signing a verification of completion of the work. City staff may inspect the work completed during a scheduled appointment. If I am unhappy with the work, I must notify the City's Department of Housing and Neighborhood Services in writing within thirty days. If I fail to notify the City's Department of Housing and Neighborhood Services within 30 days, I hereby waive all claims.
4. **HOLD HARMLESS AGREEMENT:** To the fullest extent not prohibited by law, I agree to indemnify and hold harmless the City of Columbia, its directors, officers, agents, and employees from and against all claims, damages, losses, and expenses (including but not limited to attorney's fees) for bodily injury and/or property damage arising by reason of any act or failure to act, negligent or otherwise of the contractor, of any subcontractor (meaning anyone, including but not limited to consultants having a contract with contractor, or a subcontractor for part of the services), of anyone directly or indirectly employed by the contractor, or by any subcontractor, or of anyone for whose acts the contractor or its subcontractor may be liable, in connection with this Project. This provision does not, however, require you to indemnify, hold harmless, or defend the City of Columbia from the City's own negligence.
5. **ASSUMPTION OF RISK AND COVENANT NOT TO SUE:** I understand and agree that there are risks with any construction project, including this project. In consideration for the City's payment of the fees associated with this Project, I hereby agree, for myself, and all others who may claim through me, that I am assuming the risks associated with this Project. I further agree that I will not sue and that no one will sue on my behalf, the City, its elected officials, officers, agents and employees. This covenant not to sue includes any suit or action in law or equity, including but not limited to claims that I may have for personal injuries, death or property damage which I may sustain or that may arise out of or in connection with this Project and related activities.

I hereby certify that all of the information in this application is true and that I agree to be bound by the terms set forth above.

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Signature of All Property Owners

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Date

Return by email at [weatherizationgrant@como.gov](mailto:weatherizationgrant@como.gov) or in person at 11 N. 7th Street, Columbia, MO 65201.

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For City Staff:

Property Ownership and Age of Home Verified

Property Located within a Qualified Census Tract (QCT)?

- If NO to QCT, phase II (HVAC) will require additional income verification including receiving a copy participant's 2023 1040.

Not Approved

Approved—Amount not to exceed \$\_\_\_\_\_

Notification emailed to Contractor on \_\_\_\_\_ (date). Copy saved to the file.

Notification emailed or mailed to Applicant on \_\_\_\_\_(date). Copy saved to the file.

Work Scheduled for: \_\_\_\_\_ (date)

Invoice and Completion of Work Certification Received on \_\_\_\_\_ (date)

Before and After photographs attached to the file

Invoice Processed and Payment made