 Permission Release  
YVEDDI Weatherization Assistance Program

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| Job #: | | | |
| Participant Name: |  | | |
| Address: |  | | |
|  | | |
| Home: | Own  Rent (Name of Landlord/Property Owner): | | |
| **Permission to Enter Premises/Property to Perform an Energy Audit** | | | |
| An Energy Audit is performed in order to determine what work needs to be done to your home/property to decrease energy usage. | | | |
| **Permission to Perform Work (Contingent on Energy Audit Results)** | | | |
| Weatherization Measures That May Be Performed: | | | |
| Safety check/clean/tune of heating systems and appliances  Replace heating system  Duct Sealing   General air sealing  Weather Stripping doors  Insulation of attic/ceiling   Insulation of sidewalls | | Insulation of floor/bellyboard  Smart Thermostat  Hot water tank insulation  Hot water pipe insulation  Lighting – LED light bulbs(s)  Low flow showerhead  Furnace filters  ASHRAE fan and timer switch | |
| **Consent to Replace Refrigerator** | | | |
| *Note: In order to receive a new energy efficient refrigerator from the YVEDDI Weatherization Assistance Program; I understand that I must surrender my old refrigerator to Lowe’s Home Improvement at the time the new one is delivered.* | | | |
| **Participant:**  By signing below, you are granting your permission and do hereby authorize the YVEDDI Weatherization Assistance Program to perform the above items to the said dwelling as listed, with the understanding there shall be no charge to you for either labor or materials; and I do hereby release and pledge to hold blameless YVEDDI, its staff and volunteers, from any liability whatsoever in the performance of this authorization or eventually arising therefrom. Any complaints arising from the repairs or the performance of the assisting agency, its staff and/or volunteers shall be reported to the N.C. Department of Environmental Quality in writing, which in accordance with rules and regulations will verify the complaint. I further certify that I have given my permission to allow work on the property listed above in accordance with the provisions listed. | | | |
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| Participant’s Signature | | | Date |
|  | | | |
| Property Owner Name (please print) | | | |
|  | | |  |
| Property Owner Signature | | | Date |
|  | | |  |
| Employee Signature | | | Title |
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