



Request completed by:

Date:

COLIMBIA BASIN ELECTRIC COOP Residential Weatherization Audit Request

CONSUMER INFORMATION					
Account #		Phone			
Name					
Site Address					
City		State		Zip	
Mailing Address (if different)		Contact Email			
City		State		Zip	

HOME INFORMATION							
<input type="checkbox"/> Site Built Home			<input type="checkbox"/> Manufactured Home		<input type="checkbox"/> Condo/Townhouse		Year House was Built
Number of Levels		Square Footage		Foundation Type	<input type="checkbox"/> Crawlspace	<input type="checkbox"/> Slab	<input type="checkbox"/> Basement
Existing Windows	<input type="checkbox"/> Single Pane <input type="checkbox"/> Metal Frame	<input type="checkbox"/> Double Pane <input type="checkbox"/> Vinyl Frame	<input type="checkbox"/> Storm <input type="checkbox"/> Wood Frame				
Primary Interest	<input type="checkbox"/> Attic	<input type="checkbox"/> Floor	<input type="checkbox"/> Walls	<input type="checkbox"/> Windows			
Heat Source	<input type="checkbox"/> Forced Air Electric <input type="checkbox"/> Heat Pump	<input type="checkbox"/> Wall/Baseboard <input type="checkbox"/> Ceiling Cable	<input type="checkbox"/> Ceiling Cable <input type="checkbox"/> Other _____	<input type="checkbox"/> Ductless Heat Pump			

CONTACT FOR APPOINTMENT			
Owner Name		Phone	
Renter		Phone	
Owner or Property Manager Signature			

RESPONSE / ACTION	
<input type="checkbox"/> Customer has bids	<input type="checkbox"/> Low use
<input type="checkbox"/> Remodeling	<input type="checkbox"/> Remodeling
<input type="checkbox"/> Contractor referred	<input type="checkbox"/> Contractor referred
<input type="checkbox"/> High energy use	<input type="checkbox"/> High energy use

Additional Notes: