



## Viva Verde Residential Energy Efficiency Assessment Application Form

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

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Name and phone # of someone if unable to reach you \_\_\_\_\_

Do you rent? \_\_\_ Property Owner's Name: \_\_\_\_\_ Phone \_\_\_\_\_

Home type: Single Family Site Built \_\_\_ Mobile \_\_\_ Multi Family \_\_\_ Other \_\_\_\_\_

Year home built \_\_\_\_\_

**The FREE Viva Verde Residential Energy Efficiency Audit is for minor improvements to help the applicant/client conserve energy in their home. This program Does Not do major repairs including, but not limited to, plumbing, electrical, roof damage, storm windows, and mobile skirting. This program will only be making improvements directly related to the energy efficiency of the home. These improvements are not covered by any guarantee or warranty.**

**I am voluntarily participating in this free program and I am fully aware of the risks and hazards connected with the participation. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OR LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY that may be sustained by me, or loss or damage to property owned by me, as a result of participation in this program.**

**I thereby grant permission to the Viva Verde Residential Energy Efficiency (VVREE) Program staff to enter my property and to make applicable improvements for the weatherization of my home. I also release and pledge to hold harmless the VVREE Program staff and Gila Resources Information Project from any liability resulting from these improvements.**

**I understand that services cannot be provided if health and safety problems are beyond the scope of this program. It is the responsibility of the applicant to correct unsafe conditions or to contact alternative funding sources for assistance. I agree to provide clear access to all windows, doors, pipes, lights, shower and faucets at the time of appointment.**

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN TO: Viva Verde c/o Gila Resources Information Project  
305A North Cooper Street • Silver City, NM 88061  
info@vivaverdenm.com • phone/fax 575.538.8078  
www.vivaverdenm.com**