



**Weatherization Certification of Individual Adult (over the age of 19) Claiming  
Zero Income**

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

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

I certify that I am a member of the above-referenced household, am over the age of nineteen (19) and have neither earned nor received any income over the previous three (3) calendar months.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_