



Government of the Virgin Islands
of the United States
Virgin Islands Energy Office
Weatherization Assistance Program



Eligibility Inquiry Form

The Virgin Islands Energy Office Weatherization Assistance Program’s (VIEO WAP) goal is to improve energy efficiency for low-income families, particularly for the elderly, people with disabilities, and families with children under 5 years old, by improving the energy efficiency of their homes while ensuring their health and safety.

What can VIEO WAP do for you if you are eligible?

If eligible for this program, you may have your inefficient household updated with low-flow showerheads and aerators, energy efficient light-bulbs, air-conditioner replacements, an ENERGY STAR refrigerator, water heater replacement, hot water heater timer, and other approved items. You will also receive educational material on how to keep your energy burden low.

Eligibility

You are eligible to apply if you are:

- A person disabled or family with one or more members with a disability
- A family with children under 5 years old
- A person 60 years of age or older
- A family with high energy burden – (where 20% or more of the household income is going towards the energy bill)
- A family with high energy use – (energy usage above average because of household composition or unusual needs for energy)

However, one of the primary factors affecting eligibility is income. Household income should fall below the 200% poverty level as follows:

2023 WAP INCOME GUIDELINES

Size of Family Unit	Threshold	200%
1	\$ 16,770	\$ 33,540
2	\$ 22,680	\$ 45,360
3	\$ 28,590	\$ 57,180
4	\$ 34,500	\$ 69,000
5	\$ 40,410	\$ 80,820
6	\$ 46,320	\$ 92,640
7	\$ 52,230	\$ 104,460
8	\$ 58,140	\$ 116,280

For families with more than 8 people, 100% of poverty level increases \$5,910 for each additional person. Therefore, for weatherization at 200% of poverty level, add \$11,820 for each additional person. (<https://aspe.hhs.gov>)

Required Documents

This is a list of documents required to determine your household’s eligibility for VIEO WAP. Please do not submit any originals. Only copies of the required documents will be accepted. If needed, the VIEO will make the necessary copies for you when submitting the application.

1. **Income Verification from Employment** – For every household member, provide verification (two paycheck stubs) for the past 30 days of income issued by the employer.
2. **Income Verification from Other source(s)** – Provide income verification for everyone in the household 16 years of age and older who receive income from any source. Please provide an award letter, check stub, or other third- party verification if receiving any of the following:
 - Disability
 - AFDC/ TANF/ SNAP
 - Retirement/ pension/annuity
 - Unemployment Income
 - Other _____
 - Disability Income
 - Alimony
 - Veterans Administration Benefits
 - Social Security
3. **Proof of Ownership/Occupancy** - Verification that the applicant either owns or rents the dwelling (deed, lease agreement, rent receipt, mortgage payment, etc).
4. **Household Occupant Verification** - Provide a copy of each household member’s picture ID and a form of occupancy verification.
5. **Taxes** - The previous fiscal year federal taxes filed with the IRS (include all pages and W-2), or the last three years of complete taxes if self-employed. *If you have earned income in the past two years and have not filed taxes, please submit a notarized statement attesting to that.*
6. **Utility Bills** - Current utility bills. If the person on the listed utility bill does not currently reside at the property, documentation to that effect is needed, such as:

For more information on the program, you may contact:

St. Thomas Office (340) 714-8436 #8000 Nisky Center 2nd Floor , Suite #208	St. Croix Office (340) 713-8436 #2 Estate Carlton, Suite #3 Frederiksted
Calvert Charleswell (ext. 4306) calvert.charleswell@eo.vi.gov	Jarell O’Connor (ext. 3619) jarell.oconnor@eo.vo.gov

Or complete the following information and we will reach out to you:

First Name: _____ Last Name: _____

Phone: _____ Email: _____