



# FLORIDA WEATHERIZATION ARRA FIELD MONITORING REPORT



Client Name *(Please Print)* \_\_\_\_\_

Job Number \_\_\_\_\_

Agency Name *(Please Print)* \_\_\_\_\_

County \_\_\_\_\_

Client File Review	Yes	No / N/A	Circle If Follow-up Required
CLIENT INTAKE FORM (CIF) COMPLETE			Agency
OWNERSHIP / LANDLORD AGREEMENT			Agency
DOCUMENTATION OF INCOME			Agency
GREIVANCE POLICY			State Office
SS NUMBERS REDACTED (EX. LAST 4) FOR ALL			Agency
DOCUMENTATION OF DISABILITY IF CLAIMED			State Office
CLIENT PHOTO ID, SIGNATURE AND DATE ON CIF			Agency
CLIENT PRIORITY FORM (WITH SCORE)			State Office
COMPLETED PLAT IN FILE			State Office
MEASURES ON BWR FOLLOW PRIORITY LIST			State Office
IS THE PWOA SIGNED PRIOR TO THE BWR			Agency
BUILDING WORK REPORT COMPLETE			Agency
REQUIRED MEASURES OR JUSTIFICATION NOT			Agency
NEAT/MHEA AUDIT IN FILE IF HVAC REPLACED			Agency
DATES ON PLAT/NEAT/MHEA/PWOA AFTER CIF			Agency
SPENDING LESS THAN \$3,000 AIR INFILTRATION			Agency
BLOWER DOOR READINGS PRE AND FINAL			Agency
PRE AND POST MONOXOR TESTS PERFORMED			Agency
CLIENT SIGNATURE/DATE ON BWR			Agency
AGENCY INSPECTOR SIGNATURE/DATE ON BWR			Agency
COPY OF BID PACKAGE			State Office
COPIES OF INVOICES OR RECEIPTS IN FILE			Agency
ARE THERE COPIES OF ANY PERMITS			State Office

**COMMENTS:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>Client File Review</b>	<b>On-Site Dwelling Inspection</b>	<b>eGrants Data</b>
_____ Date Approved	_____ Date Approved	_____ Date Approved

	<b>For DCA Use Only</b>
	Date Received _____
<b>Field Monitor Signature</b> (Approved for Submission)	Consultant Review _____

On-Site Dwelling Inspection	BWR Measure Installed	Follow-Up Required
<b>REQUIRED MEASURES</b>		
AIR FILTERS - AC / HEAT		
FAUCET AERATORS		
LOW FLOW SHOWERHEAD		
WATER HEATER WRAP		
WATER LINE-INSULATE		
<b>INFILTRATION REDUCTION</b>		
CAULKING		
CEILING REPAIRS - MINOR		State Office
DOORS - EXTERIOR		State Office
FLOOR REPAIR-MINOR		State Office
THRESHOLD		
WALL REPAIR-MINOR		State Office
WEATHERSTRIP		
WINDOW-REPAIR/REPLACE		State Office
<b>WEATHERIZATION MEASURES</b>		
COOLING-CENTRAL		
COOLING-WINDOW		
DUCT SYSTEM - REPAIR		
HEATING-CENTRAL		
HEATER-SPACE		
INSULATION - ATTIC		
INSULATION - FLOOR		
ROOF-M.H. COATING		
SCREENS-SOLAR		
VENTILATION-ATTIC		
LIGHTING		
REPLACE REFRIGERATOR		
H&S-CO/FIRE ALARMS, STOVE VENTS		
WATER HEATER - REPAIR		
WATER HEATER - REPLACE		

**COMMENTS:**  
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**FAX one Copy to Provider Agency and one Copy to State Monitor at (850) 488-2488**