

THE WARM PROJECT
Green Street
Wexford
Tel : 053 9160752
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The Warm Project

Energy efficient homes for the community

Application Form for Insulation Services

Personal Details: *(These details should relate to the head of the household/home owner)*

Name: _____

Address: _____

Contact number: _____

Date of Birth: _____ Age: _____

Social Welfare Pension Details: *Please tick*

Old age Pension Widow/Widowers Pension Invalidity Pension

Disability Allowance Carers Allowance Farm Assist

Job Seekers Allowance Job Seekers Allowance (over six months with child dependant under seven years of age) Family Income Supplement

Are you in receipt of a fuel allowance Yes No

Ownership of House: *Please tick*

SELF Local Authority Wexford Borough Council Other

Have you availed of any previous service from The Warm Project Yes No

Number of occupants residing in the house _____

Number of dependants residing in the house: Adults ____ Children ____

Smoke alarm installed Yes No

Works to be carried out: *Please tick* Attic Insulation and/or Cavity Wall Insulation

What year was your house built _____

I declare that all the information supplied above is correct and that I satisfy the criteria for Insulation Services under the Better Energy Warmer Homes Scheme as outlined at date of application.

Signed: _____ Date : _____
Occupier

Completed application forms should be returned to the offices of THE WARM PROJECT at the above address.