



Vermont Gas Weatherization Income Verification Form

PLEASE RETURN TO:

Champlain Housing Trust
Attn: Loan Fund
88 King Street
Burlington, VT 05401

Fax: (802) 862-5054 • Email: loans@getahome.org

If you need assistance, call (802) 861-7388 or toll free (877) 274-7431

INSTRUCTIONS:

1. Please fill out the entire document and provide the necessary documents listed below. We cannot process your form until we receive ALL of the information
2. Your total household income (gross, before taxes) must be at or below the following limits *(updated April 2025)*:

Area		Household Size							
		1	2	3	4	5	6	7	8
Addison County	80%AMI	\$ 65,050	\$ 74,350	\$ 83,650	\$ 92,900	\$ 100,350	\$ 107,800	\$ 115,200	\$ 122,650
Chittenden/Franklin/Grand Isle	80%AMI	\$ 72,700	\$ 83,100	\$ 93,500	\$ 103,850	\$ 112,200	\$ 120,500	\$ 128,800	\$ 137,100

REQUIRED DOCUMENT CHECKLIST

- ☐ Copies of one month's worth of most recent pay stubs
- ☐ Documentation of all other income sources (i.e. Award Letters from Social Security, Disability, Pension, Child Support)
- ☐ Self Employed borrowers must submit a Year-to-Date Profit and Loss Statement and the last two years of Federal Income Tax forms, complete with all schedules
- ☐ Most recent Property Tax Bill or Property Deed
- ☐ Any additional information



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Name: _____

Social Security Number: ____-____-____ Birth Date: _____

Mailing Address: _____

Property Address (if different): _____

Email Address: _____

Phone Number: _____

Best way to Reach you (**circle one**; only choose email if you check it at least once a day): phone email

Total Household Size _____ (Include anyone living in the house)

What type of project are you applying for through Vermont Gas (select one)?

- ☐ Equipment Replacement
- ☐ Weatherization Upgrades
- ☐ Both

PART TWO: INCOME INFORMATION

Gross Income: Please list the combined income, before taxes and other deductions, of everyone (including minors) in the household. This may include, but is not limited to: job earnings, self-employment income, Social Security, Disability, Section 8 Housing Voucher, unemployment, worker's compensation, severance pay, annuity disbursement, pension, retirement benefits, Armed Forces pay, alimony/maintenance, child support, regular gifts, lottery winnings, rental income, and interest/dividend income from assets.

<u>Household Member</u>	<u>Source</u>	<u>Pay Rate</u>	<u>Pay Frequency</u>	<u>Monthly Income</u>

****For wage/salary income, please submit one month's worth of your most recent paystubs****

****For Social Security/Benefits, please submit Award Letter****

****For Self-Employment, Two Years Tax Returns and Year to Date Profit and Loss****

****Most recent statement for other sources****



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PART THREE: OWNERSHIP INFORMATION

Year of Purchase: _____ Town/Village where taxes are paid: _____

Names listed on Deed: _____

***please enclose a copy of your tax bill**

If you recently purchased, please provide a copy of the deed to show proof of ownership

PART FOUR: AFFIRMATION, AUTHORIZATION, ACKNOWLEDGEMENT, AND SIGNATURES

Each of the undersigned specifically represents to Champlain Housing Trust, Inc. (CHT) Vermont Gas, and to CHT's actual or potential agents, brokers, processors, attorneys, insurers, servicers, successors and assigns and agrees and acknowledges that:

1. The information provided in this packet is true and correct as of the date set forth opposite my signature and that any intentional or negligent misrepresentation of this information contained in this application may result in civil liability, including monetary damages, to any person who may suffer any loss due to reliance upon any misrepresentation that I have made on this application, and/or in criminal penalties including, but not limited to, fine or imprisonment or both under the provisions of Title 18, United States Code, Sec. 1001, et seq.
2. All statements made in this packet are made for the purpose of determining program eligibility
3. The property will not be used for any illegal or prohibited purpose or use
4. The property will be occupied as indicated in this packet as the account holder's primary residence

Acknowledgement. Each of the undersigned hereby acknowledges that Champlain Housing Trust, Inc., its servicers, successors and assigns, may verify or reverify any information contained in this application or obtain any information or data relating to the Eligibility Worksheet, for any legitimate business purpose through any source, including a financial institution, employer, creditor, landlord, or any other source listed in this form, or a consumer reporting agency.

Please sign, date, and print your name in the spaces indicated below.

Sign Here: _____

Date: _____

Print Name: _____

Vermont Gas Account Holder



Champlain Housing Trust, Inc. is an Equal Housing Opportunity program. Discrimination is prohibited by Federal Law