U.S. Department of Energy

WEATHERIZATION ASSISTANCE PROGRAM ENHANCEMENT AND INNOVATION (E&I)

SUBGRANTEE INFORMATION WORKSHEET

Grant #:	State:	Program Year:	
Duns Number:		Name:	
Phone:		Email:	
Address 1:		Contact:	
Address 2:		Fax:	
City:		State:	_ Zip Code:
Tentative allocation: Planned units: Type of organization: Sources of Labor:	Counties served:		Congressional Districts:
Duns Number:		Name:	
Phone:		Email:	
Address 1:		Contact:	
Address 2:		Fax:	
City:		State:	_ Zip Code:
Tentative allocation: Planned units: Type of organization: Sources of Labor:	Counties served:		Congressional Districts:
Duns Number:		Name:	
Phone:		Email:	
Address 1:		Contact:	
Address 2:		Fax:	
City:		State:	Zip Code:
Tentative allocation: Planned units: Type of organization: Sources of Labor:	Counties served:		Congressional Districts:

OMB Burden Disclosure Statement

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

U.S. Department of Energy WEATHERIZATION ASSISTANCE PROGRAM WAP SUBGRANTEE INFORMATION INSTRUCTIONS

Item	Explanation		
DUNS Number	Enter the unique Dun & Bradstreet (DUNS) number associated with the subgrantee (Required)		
Name	Name of subgrantee contracted by the state to perform weatherization services (Required)		
Contact	Name of contact at the agency		
Phone, Email, Address, Fax, City, State, and Zip Code	Self-explanatory (Required)		
Tentative Allocation	Self-explanatory (Required). Tentative allocation can include non-DOE funding if included in the DOE budget.		
Planned Units	Self-explanatory (Required). Planned units can include those completed with non-DOE funds if included in DOE budget.		
Type of Organization	Local action agency, non-profit, tribal organization, unit of local government (Required)		
Sources of Labor	Crews, contractors, or both (Required)		
Counties Served	Self-explanatory (Required)		
Congressional Districts	Self-explanatory (Required)		

Complete this information for each subgrantee.

PAPERWORK REDUCTION ACT BURDEN DISCLOSURE STATEMENT

This data is being collected to be used by program staff to track Community Scale recipients' activities, their progress in achieving scheduled milestones, and funds expended. The data you supply will be used to enable program staff to provide required or requested information on program activities to OMB, Congress, and the public.

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Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB control number.

Submission of this data is required.