

Client File Monitoring Form

Agency:

Client Name and/or file Number	Application	Notification Letter	Verify Inc Doc's	Property Owner Verification	Mobile Home SN	L/T Agree	CAZ or Dwelling Assess.	Blower Door Test	Mat & Labor cost sheet write cost if available	Primary Heating System	WX As-Is & Post AKWARM	Does IOR match the scope of work	Final Inspection	Photos	Lead Base Pre 1978 Year Built Home	Certified Renovator doc's	Client Renovate Right letter	SHPO doc's	Comments	
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								POST:			POST:									

Income Verification

Client Name/Wx#	#in Household	Income Limit	Income reported	Income reported by agency	Priority level

Material verification

Client #	POs Verified	Material from vendor verified