## **Important Information**

Customers seeking approval for modification(s) to their property, are required to provide medical documents supporting the reasoning of the modification request. It is recommended that all Hume Customers seeking a Modification Request read the (Hume's 'Modification Policy') prior to submitting this request form. This Policy can be located on the Hume website.

*NOTE:* This form must be received <u>prior</u> to an Occupational Therapist (OT) report being obtained. Hume requires that a Technical Officer attend any OT appointment organized in relation to seeking modifications.

Customer Details (please enter at least one contact method.						
Full Name:						
Address:						
Email Address:						
Contact Number:						
Is the modification for the: $\Box$ head tenant or an $\Box$ additional occupant?						
Do you have a current Transfer approved?  Yes No Unsure						
If 'No', would you consider a transfer to a suitable property if available 🗆 Yes 🛛 🗋 No						
Does the person receive any government support through the NDIS or My Aged Care?						
□ Yes, I have a NDIS plan.						
□ Yes, I receive My Aged Care services.						
$\Box$ No, but I have recently applied.						
If you answered yes to the above, does the plan include funding for home modifications?						
□ Yes □ No □ Unsure						
Please provide the contact details for the NDIS Planner or Aged Care Provider:						
Organisation:						
Case manager/planner name:						
Email:						
Phone number:						

## This form must be completed fully and signed to be processed. You will receive a written response within 21 days.

Please note the following conditions may be required for the approval for modifications to a property:

- An Occupational Therapist report and relevant medical reports outlining the modifications required.
- Evidence that you are eligible or ineligible for support under the National Disability Insurance Scheme.
- Contact details for my NDIS or My Aged Care service provider if applicable.

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Approved by:	General Manager Assets	Review date	08 <sup>th</sup> March 2024

## **Details of modification**

## Please select the type of modification from the options below:

MINOR MODIFICATIONS	
□ Handheld shower	Other: (e.g., doorbell for hearing impairment)
$\Box$ Lever style taps	
🗆 Grab rails	
Strobe light smoke alarm (for	
Customers with hearing impairment)	
MAJOR MODIFICATIONS	
Widening door	Other:
□ Kitchen modification	
□ Bathroom modification	
□ Laundry modification	Any Additional information
□ Carpet/flooring replacement	
□ Entrance/exit ramp	
$\Box$ Hoist installation	
Medical Reasoning for	
Modification Request: Description of Modification's	
required to the property	
Type of Modification	Documents Required
Minor Modifications	Medical Certificate
Documents Required	Written report from the Doctor / Health Care Professional
	Completed and Signed Request for Modification form
Major Modifications	Medical Certificate
Documents Required	Written report from an Occupational Therapist or Specialist
	Complete and Signed Request for Modification form.
	NDIA Support Package Details
	Other supporting documents

Customer Signature	
Date	

Please return this form and support documents to <u>modifications@humehousing.com.au</u> or to your nearest Hume office.

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