**Homeowner Consent for Home Modifications**

I/We, (name of owner as stated on current Council Rates Notice; consumer owned dwelling within a retirement village sight ownership documentation, as viewed by practitioner)

Owner/s of the premises at (address)

Which at present is the home of (consumer’s name)

Authorise the following modifications

Required Documents:

* Home modifications valued up to $2,000
	+ Home Owner Agreement Form with photo identifying existing condition and noting proposed modifications
	+ Quote (signed, named and dated by home owner)
* Home modifications valued over $2,000 we would request on application submission
	+ Home Owner Agreement Form with photo identifying existing condition and noting proposed modifications
	+ Quote (signed, named and dated by home owner)
	+ Scope of Works – signed by builder
* Please note: There should be no deviation from the accepted quotation/submitted scope of works without consultation and approval from all parties concerned ie SWEP, home owner and referring therapist.

I understand that any difference between the actual cost of the modification and the subsidy that SWEP will fund will be covered by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and that the Practitioner/Consumer has discussed this with me.

I understand that the modifications, when they are carried out, will be owned and maintained by me, the home owner. SWEP will not be responsible at any time for any costs incurred in restoring the premises to the original condition, or that may arise from the installation of the modification/s.

Home Owner Signature:

Printed Name:

Date:

**Prepared by:** (Therapist name)

Occupational Therapist

Organisation:

Phone:

Email:

Signed:

Date:

**Builder/Supplier** required to sign when works areover $2,000

Name:

Signed:

Date:

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| Provide photo of existing area and diagram including specifications of proposed modifications here: (add pages as required – remember to have additional pages signed) |