



**Link
Wentworth**
Providing homes, building futures.

Disability Modifications Request Form

Use this form to request a modification to your property. A modification is a change to the structure, layout or fittings of the property so you can safely access and move around in your home.

Disability modifications generally improve the accessibility of the property. Examples include grab rails, lever style taps and door widening. We generally need you to provide an Occupational Therapist (OT) Report or evidence from your doctor or a trained medical provider to help us assess your request.

Please see the Disability Modifications Policy ([hyperlink when approved](#)) for more information.

Your Details

Full Name:	
Address:	
Suburb:	Postcode:
Phone No:	
Email Address:	

Details of Modification Requested

Please advise the type of modification from the options below:	
Minor Modifications	
<input type="checkbox"/> Grab rails	<input type="checkbox"/> Lever style door handle
<input type="checkbox"/> Lever style taps	<input type="checkbox"/> Strobe light smoke alarm <i>(for tenants with hearing impairment)</i>
<input type="checkbox"/> Hand held shower	
Other:	
Any additional information:	

Major Modifications (OT or Allied Health report required)	
<input type="checkbox"/> Widening door	<input type="checkbox"/> Laundry modification
<input type="checkbox"/> Kitchen modification	<input type="checkbox"/> Carpet/flooring replacement
<input type="checkbox"/> Bathroom modification	<input type="checkbox"/> Hoist installation
<input type="checkbox"/> Entrance/exit ramp	
Other:	
Any additional information:	



Support provider details

Do you have any current support through NDIS or MyAgedCare?	
<input type="checkbox"/>	Yes, I have an NDIS Plan
<input type="checkbox"/>	Yes, I receive MyAgedCare services
<input type="checkbox"/>	No, but I have recently applied for NDIS or MyAgedCare
<input type="checkbox"/>	No, I do not receive support

If you have answered yes to the above, does your plan include funding for home modifications?					
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Unsure

Please provide the contact details for your NDIS Planner or Aged Care Provider	
Organisation:	
Support Coordinator/Planner name:	
Email:	
Phone Number:	
Please provide a copy of your Occupational Therapist report and/or any other supporting documents	

Additional information for modifications

Please provide the details below for the contractor or tradesperson who will be completing the modifications you are requesting.

Contractor Name:	
Contractor Address:	
Suburb:	Postcode:
Contact Number:	
ABN:	



**Link
Wentworth**
Providing homes, building futures.

Disability Modifications Request Form

Conditions of Approval

Please complete all sections of this form and sign below to allow Link Wentworth to assess your request for disability modifications.

Please note the following conditions of approval for modifications to a property:

<input type="checkbox"/>	I have submitted an Occupational Therapist report and relevant medical reports outlining the modifications needed (if requested)
<input type="checkbox"/>	I have provided evidence that I am eligible or ineligible for support under the NDIS or MyAgedCare
<input type="checkbox"/>	I have provided the contact details for my NDIS or MyAgedCare service provider

Name:
Date Signed:
Signature:

Link Wentworth Housing's Privacy Policy describes how personal information about you is collected, stored, shared to external parties and discarded in accordance with the NSW Privacy Act 1998.

Office use only

<input type="checkbox"/>	Tenant has been referred to Sustainable Tenancies Team
<input type="checkbox"/>	Home visit with Tenancy, STT, Asset completed
<input type="checkbox"/>	Maintenance Supervisor approval