

# Home Modification Assessment Quote Form

DATE / /

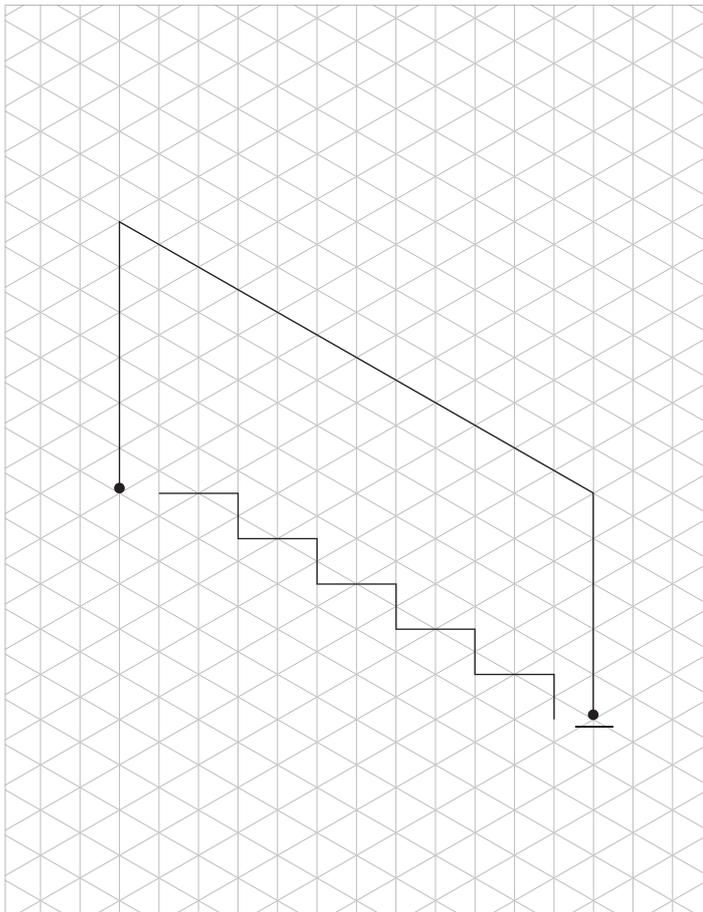
## CLIENT DETAILS

CLIENT NAME \_\_\_\_\_  
 TELEPHONE \_\_\_\_\_  
 MOBILE \_\_\_\_\_  
 EMAIL \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 SUBURB STATE POSTCODE \_\_\_\_\_  
 DOB / /  MALE  FEMALE  
 LOCATION OF ASSESSMENT \_\_\_\_\_

## FUNDING

NDIS  SWEP  
 TAC  DVA  
 HOME CARE PACKAGE  PRIVATE  
 NDIS PARTICIPANT NUMBER \_\_\_\_\_  
 NDIS PLANNER \_\_\_\_\_  
 NDIS COS AGENCY \_\_\_\_\_  
 NDIS COS COORDINATOR NAME \_\_\_\_\_

## STAIRS



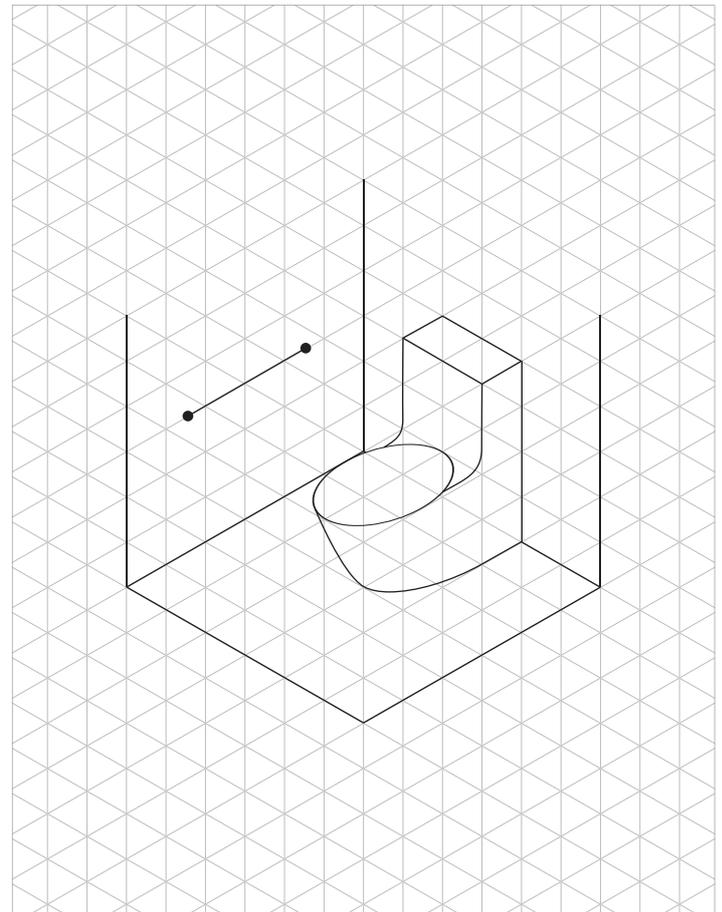
## HEALTH PROFESSIONAL

NAME \_\_\_\_\_  
 TELEPHONE MOBILE \_\_\_\_\_  
 EMAIL \_\_\_\_\_  
 FACILITY / PRACTICE NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 SUBURB STATE POSTCODE \_\_\_\_\_

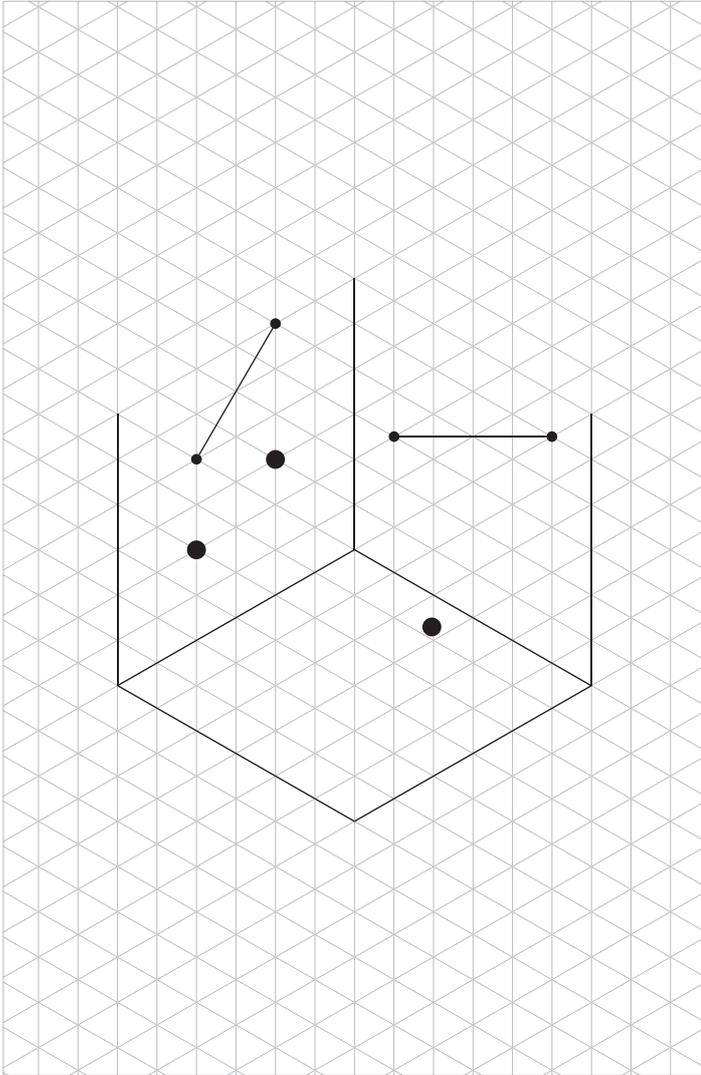
## MODIFICATION REQUESTS

BASIC GRAB RAILS  300MM  450MM  600MM  
 HAND HELD SHOWER  
 BASIC FREE STANDING BANNISTER RAILS  
 MAGNETIC DOOR CATCHERS  
 REMOVAL OF SHOWER SCREEN DOORS AND REPLACE WITH SHOWER CURTAIN  
 MERBAU LINED PLATFORM STEP  
 THRESHOLD RUBBER RAMPS AND RUBBER SHOWER BASE INSERTS  
 CHAIR RAISER PLATFORMS  
 WEIGHT BEARING GRAB RAIL  
 OTHER \_\_\_\_\_

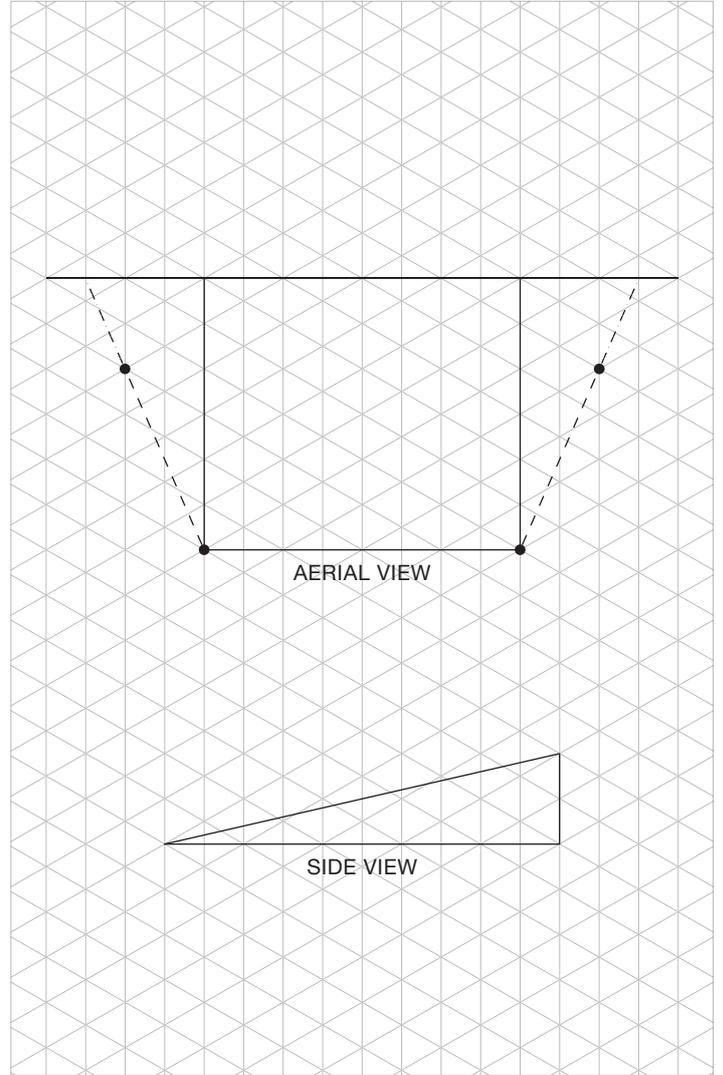
## TOILET



## SHOWER STALL



## RAMPS



## NOTES