

HOME MODIFICATION PROJECT REQUEST

CONSUMER NAME: _____

PHONE: _____

CONSUMER'S HOME MODIFICATION NEEDS:

Ramp Widen Doorway(s) – location: _____

Bathroom: Grab Bars Adjustable Shower Head Bench Seat

Roll-In Shower

Other: _____

POTENTIAL FUNDING AND/OR PROJECT CONTRIBUTORS:

Arctic Access Waiver VR HIP MH Trust

DD STAR Grant Home Care

USDA, 504 loan/grant Sr. Access Program RuralCAP Other

SPECIFIC Rural Housing Program REQUEST:

Bid Request: YES or NO Materials Only Labor & Materials Shipping

PROJECT BID TOTAL: \$ _____

Forward bid to: Audrey Aanes – Arctic Access (email: dreamer@alaska.net or fax 907-345-0715) 1-800-778--2393 or 907-442-2393

Authorized Project Contribution: \$ _____ or _____

Conditions: _____

Project Breakdown

Materials to be purchased by: _____

Labor provided by: _____

FUNDING DETERMINATIONS:

Choice WAIVER \$10,000 + Shipping Payable to: _____

Labor Materials Freight As Needed

Status: _____

Care Coordinator: _____

STAR GRANT _____ Payable to: _____

Labor Materials Freight As Needed

Status: _____

Contact: _____

ARCTIC ACCESS \$ _____ Payable to: _____

Labor Materials Freight As Needed

Status: _____

Contact: _____

SR ACCESS PROG \$ _____ Payable to: _____

Labor Materials Freight As Needed

Status: _____

Contact: _____

RURAL CAP \$ _____ Payable to: _____

Labor Materials Freight As Needed

Status: _____

Contact: _____

VOC REHAB \$ _____ Payable to: _____

Labor Materials Freight As Needed

Status: _____

Contact: _____

OTHER \$ _____ Payable to: _____

Labor Materials Freight As Needed

Status: _____

Contact: _____

OTHER \$ _____ Payable to: _____

Labor Materials Freight As Needed

Status: _____

Contact: _____