

Home Care Package Major Modifications Referral Form



To be completed for Home Care Package Major Modifications (over \$3,300.00)

Title

First Name

Surname

Mr

Mrs

Miss

Ms

Preferred Name

Date Of Birth



Day Month Year

Street Address

Suburb and Postcode

Postal Address (if different from above)

Suburb and Postcode

Phone

Mobile

E-Mail

Additional Contact Person

Relationship to Client

Phone

Mobile

Consent to act on behalf of recipient

Yes

No

Residency Type

- Private Residence (Client or Family Owned/Purchasing)
- Private Rental
- Public Rental
- Independent Living Unit

Owner / Landlord / Agency Name (if applicable)

Owner / Landlord / Agency Postal Address

Suburb / Postcode

E-Mail

Phone

Mobile

Home Care Package Level

- 1
- 2
- 3
- 4

HCP Provider

HCP Contact Person

Postal Address

Suburb and Postcode

Phone

Mobile

E-Mail

E-Mail Address for Quotes (if different from above)

E-Mail Address for Tax Invoices (if different from above)

Occupational Therapist Name

Occupational Therapist Organisation

Phone

Mobile

E-Mail

Type of Modification

Shower

Toilet

Bathroom Alteration

Ramp

Kitchen

* Please note we no longer provide quotes for Stairlift, Platformlift or Waterlift Modifications for Home Care Packages, please contact Lift Installers direct for quotes.

Home Care Package Budget Allowance for Modification

(this is requested, so the budget can be taken into consideration in the design)

Would the Occupational Therapist like to attend the builders assessment?

Yes

No

Preferred day and time for assessment visit with builder

Fee for Service

1 Home Assessment by Home Assist Community Services builder with Occupational Therapist.

1 Floor Plan (this allows for one revision of Floor Plan only).

Total = \$125.00 Inc GST

Quote

The quote for the requested modification will then be provided to the Home Care Package Provider for their consideration.

Please note a \$55.00 quote fee is payable if quote is not accepted.

Cancellation

Home Assist Community Services will charge a \$55.00 fee if referral is cancelled 24 hours after submission.

All work requested has been discussed with and has the consent of the client and their Home Care Package Provider. Client and Home Care Package Provider are aware and accept the fees outlined above.

Yes

Please return completed referral with any photos or diagrams to:

Home Assist Community Services - 133 Adelaide Street, Maryborough QLD 4650

majormods@homeassist.org.au



(V4 © Home Assist Community Services September 2021-2023)