

Wheelchair Ramp/Home Safety Repair Application



North Central Community Action
Agency
301 E. 8th St. Suite 109
Michigan City, IN 46360
219-872-0351 EXT 107

PLEASE NOTE: MANDATORY!!!!
This application cannot be accepted without a copy of last year's tax return "OR" a copy of last year's total income. WE DO NOT NEED SOCIAL SECURITY NUMBERS!

Ramp location. (please circle one): Front Back Side	Last Year's <u>Total Household</u> income:
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Physical Address	City	State	Zip Code	County
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Alternate Mailing Address, if different from physical

Phone number	Alternate Phone	E-Mail Address	May we e-mail you?
<input type="checkbox"/> Home <input type="checkbox"/> cell			<input type="checkbox"/> Yes <input type="checkbox"/> No

Please list all people residing at this address. Attach a separate sheet if necessary for additional household members.

Name (Last, First, Middle)	Date of birth (MM/DD/YYYY)	Age	Gender	Race	His-panic?	Disa-bled?	School Years Complete
			F / M		Y / N	Y / N	
			F / M		Y / N	Y / N	
			F / M		Y / N	Y / N	
			F / M		Y / N	Y / N	
			F / M		Y / N	Y / N	
			F / M		Y / N	Y / N	

Race Codes: A - Asian; B - Black or African American; I - American Indian or Alaska Native; P - Native Hawaiian or other Pacific Islander; W - White or Caucasian; M - Multiracial; O - Other	Can you contribute any amount to material cost? (please circle one) <input type="checkbox"/> Yes <input type="checkbox"/> No
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Home Type (please circle one) Multi-unit (apartment, condo, duplex, etc.) Site-built single house, Mobile Home	Ownership (please circle one) Own Rent Other: _____	Mobility (please circle one) Walker Wheelchair: standard, oversized, or motorized
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I, the undersigned, agree that I will not hold North Central Community Action Agencies, Inc., its employees or contractors, the City of Michigan City, the City of LaPorte, North Central Community Action Agencies, Inc. volunteers, or any other volunteers associated with this project, responsible for any damage, injury, or licensing activities as a result of ramp construction/repair or post-ramp/repair construction at the address listed above.

I also agree that I will not instigate or take part in any legal or criminal action which would attempt to recover any personal or financial losses from North Central Community Action Agencies, Inc. employees or contractors, volunteers, or any other volunteers associated with the volunteer project.

I agree that pictures of my completed ramp/ramp recipient may be used in brochures and/or funding applications.

My signature certifies that the above information is correct.

Signature/ Recipient	Date (required)
Signature/ Property Owner	Date (required)

**Returning this disclaimer is only step 1 of the procedure, and, in no way, guarantees that we will construct your ramp/repair.
 PLEASE NOTE We will gladly build a ramp, but cannot remove a ramp.