# Variation Request Form (Home Modifications)

## Participant / Worker / Client details

|  |  |
| --- | --- |
| Name  | Participant number or claim number  |
|   |   |
| Address |
|   |
| Suburb | State | Postal code |
|   |   |   |
| BMPM or BMOT details  |
| Name | Organisation  |
|   |   |
| Email |
|   |
| Workdays/Hrs | Contact phone |
|   |   |
| Signature | Date of request  |
| Signature  | Click or tap to enter a date. |
| Senior Home Modification Advisor  |
| Name |
|   |
|  |
| Senior Home Modifications Officer |
| Name |
|   |

## Progress to date

|  |
| --- |
| Provide details of the work completed to date: |
|   |

## Details of variation

|  |  |
| --- | --- |
| Variation No | Provide details of the variation requested and reasons why required: |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |

## Variation request

Please provide quotes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Variation No | Items | Service Provider (i.e. who to send Purchase order to) | Est start of work  | Cost |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| **Sub-Total**  |   |
|  **GST**  |   |
| **Total** |   |

|  |  |
| --- | --- |
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