accessable
Solutions for better living

INFORMATION FORM VEHICLE PURCHASE &/OR MODIFICATION

All parties should keep a copy of this signed form for their records.

Person's Name: _____

EMS Assessor: _____ **Telephone:** ( )

Service Organisation: _____ **Date:** / /

Proposed Modifications Requested:

RESPONISIBILITIES:

- Where a vehicle has been purchased by Whaikaha – Ministry of Disabled People the person (with the disability) takes over the ownership of the vehicle.
- All maintenance of and repairs to the vehicle and/or modifications are the responsibility of the vehicle owner including running costs, warrant of fitness and registration.
- All insurance costs of the vehicle and/or modifications are the responsibility of the vehicle owner. Funding of repairs or replacement of vehicles and/or modifications due to accident, vandalism or misuse will not be provided.

THE EMS ASSESSOR HAS TOLD ME ABOUT:

- Whaikaha's funding guidelines and processes for vehicle purchase and modifications as outlined in the Vehicle Purchase and Modifications Manual.
- The assessment and service request process including timeframes.
- The specifications and likely costs of what is being requested for funding.
- The vehicle modification is subject to the technical specifications of the proposed vehicle modification complying with LVVTA requirements.
- The vehicle purchase (for people aged 16 years and over) is subject to the outcome of an Income and Cash Asset Test.

PRIVACY ACT STATEMENT

Accessable will provide Whaikaha with information about the services the person may receive.

Provision of information in this form and service request is voluntary but assessment for funding may depend upon all relevant information being provided by the person.

The person has the right to access the information held about them and the right to have corrections made to this information.

The Health Information Privacy Code applies to the information collected under this service request.

PERSON'S AGREEMENT

I agree to the request for assessment or vehicle purchase and/or modification being made. The information given in the service request is true and correct and I authorise **Accessable** to use/disclose information as described in the Statement above.

Name _____ **Relationship To Person** _____

Signature _____ **Date** / /

The signature of the guardian/agent is required when the person named is under 16 years or is unable to complete and/or sign this form.