

City of Birmingham Home Modification Program

The purpose of the program is to assist qualified disabled residential tenants and homeowners in making their homes accessible. **Applicants must live within the corporate city limits of the City of Birmingham in order to be eligible this program.**

Enclosed is the application for the Home Modification Program. Each applicant must include **income verification, for all members in the household**, this can be a copy of the checks, bank statements with account number marked out if you have direct deposit, or a copy of award letters. **Land ownership verification** such as a copy of your tax card or deed, and a **signed consent from the landlord** or rental agent for applicants who may rent the property to be modified. If your application does not contain all this information it will not be processed.

Please understand that the process is very complex and many applications are received each day it may be several months following determination of eligibility and priority before the actual work process may begin. We will do our best to complete each phase as quickly as possible.

Send completed forms to,

Home Modification Program
Disability Rights and Resources
1418 6th Ave N.
Birmingham, AL 35203

(205) 251-2223 Ext. 103

Work Authorization for Rental Property (if applicable)

Property Address:

Birmingham, AL 35_____

As owner of the above listed property, I give my consent for the current tenant, _____ to request and authorize the following modifications to be made to the dwelling to make it accessible. Please give in detail modifications that are needed:

Name of Property Owner Signature of Property Owner Date
Address:

Phone numbers: _____

For DRR use only: Verification of Consent by _____

**Application:
City of Birmingham Home Modification Program**

Name:	
Address:	
City, State, Zip Code:	
Telephone Number:	
Social Security Number:	
Date of Birth:	
Type of Disability:	
Total Family Income	
Modifications Needed	

This is a one-time opportunity for you to benefit from this grant program. List all of the modification you feel will make your home more accessible in order of priority:

Signature: _____ Date: _____