

**INSTRUCTIONS for ADv6d5
Owner's Permission to Modify Property**

PURPOSE OF FORM

The ADv6d5 obtains permission from the owner to make the indicated permanent modifications to the Member's residence.

HOW TO COMPLETE THE ADv6d5

MEMBER INFORMATION

1. Enter the Member's County of Residence
2. Enter the Member's Name:
 - a. Last;
 - b. First,
 - c. Middle
3. Enter the Address of the property to be modified:
 - a. Street,
 - b. City,
 - c. State,
 - d. Zip
4. Enter the Member's Medicaid number (9 digit unique identifier)

A. PROPERTY OWNERSHIP

Form

5. Check if property is owned by Member.

B. ENVIRONMENTAL MODIFICATION PROVIDER NAME

Form

6. Enter the name of the environmental modification provider.

C. PROPERTY MODIFICATIONS

7. Enter the complete description of proposed permanent modification to the property; if attached bid is used, record on form the bid number and provider name.

SIGNATURES

Explain to Member

8. Have the property owner read the document and discuss any concerns to be sure it is understood.

Form

9. Obtain the owner's signature, signature date
10. Printed name of owner.
11. Obtain the witness signature, signature date
12. Printed name of witness.

ROUTING

1. Case manager keeps originals for the case file and forwards a copy of the form with the ADv6d to *ADvantage* Operations, PO Box 50550, Tulsa, OK 74150-0550.
2. Retain documentation in Member's file.