



# Authority to Commence Work

## To be completed if:

- 1. **The property is owned by the occupant and requires modifications affecting 'common property' please have this form signed by Body Corporation/Owners Corporation.**
- 2. **The property is rented and part of Strata Scheme please have this form signed by both the Landlord and Body Corporation/Owners Corporation**

Name of owner/tenant or designated authority .....

Hereby authorise Scope Home Access, or their appointed contractors, to provide modifications/maintenance to:

Property Address: ..... as per the Occupational Therapists recommendations.

**Who will be responsible for paying for the recommended modifications (tick below):-**

Owner/Tenant

Landlord

Other

**Signed Owner/Tenant**

**Signed Landlord**

**Signed Body Corp/Strata**

.....

.....

.....

Name.....

Name.....

Name.....

Address.....

Address.....

Address.....

Date.....

Date.....

Date.....

Contact No. ....

Contact No. ....

Contact No. ....

CS Form 018/3

PO Box 926  
Dapto NSW 2530

ABN: 86 111 113 403  
NSW Builders Licence No: 171286C  
ACT Builders Licence No: 20121378

1300 765 887  
info@scopehomeaccess.com.au

Services across: Illawarra, Shoalhaven and South Coast NSW, Hunter, ACT and NSW Capital Country