



**Permission from Home Owner for Home Adaptation**

I, \_\_\_\_\_,  
(Full name of landlord/property owner(s))

own the property at \_\_\_\_\_  
\_\_\_\_\_  
(Enter full address, city, and zip)

I will let PA Health & Wellness (PHW) make changes to the house at the above address. The changes are to help the tenant \_\_\_\_\_ to be more independent in the home.  
(Participant's name)

- The tenant's lease ends \_\_\_\_\_ (date).
- I reside at the home mentioned above, but I am not a tenant.
- The homeowner gives a copy of one of the following.
  - 1) A home loan statement dated within the last 3 months.
  - 2) A yearly property tax statement from this year or last year.
  - 3) Warranty Deed.
  - 4) Pennsylvania Motor Vehicle Registration (for mobile homes).
- This letter allows PHW to make changes to my home. All owners listed on the home need to sign.
- I understand PHW will not return the home back to how it was.
- If the renter/participant passes away, I understand that PHW will bring the construction to appropriate completion ensuring safety of the premises. If the renter/participant enters a hospital or nursing home, PHW will finish contracted work. PHW will not remove any work already done.
- As the landlord, I understand that I cannot increase rent because of the adaptation.

Homeowner's signature \_\_\_\_\_ Date \_\_\_\_\_

Homeowner's name (Print) \_\_\_\_\_