

TECHNOLOGY FOR INDEPENDENT LIVING (TIL) - DOOR OPENER APPLICATION

To be eligible for installation of a TIL Door Opener, the applicant must be a current member of TIL or this application must accompany an **application for TIL services**.

Applicant is: Member of TIL (receives TIL services) New to TIL (has applied to TIL)

MEMBER INFORMATION

Name of Applicant (member):

Date of Birth (DD/MM/YYYY):

MEMBERS CURRENT RESIDENCE

Facility Name (if applicable):

Street Address:

City:

Postal Code:

Home Phone:

Cell Phone:

Email:

MEMBERS HOME ADDRESS: LOCATION OF DOOR (if different than above)

Street Address:

City:

Postal Code:

MEDICAL INFORMATION AND COVERAGE

Referring Therapist:

Facility/Organization:

Therapist Phone:

Therapist Email:

Street Address:

City:

Postal Code:

Does applicant have ICBC/WCB Coverage?

ICBC

WCB

NONE

* If you do have ICBC or WCB coverage, you will be asked to show proof of denial from these organizations.
Before applying for a TIL Door Opener, you must first apply to ICBC/WCB for door opener funding.

FINANCIAL INFORMATION (mandatory)

Gross Family Income (as recorded on your last tax return):

Cash Savings in Bank:

Can you, or your family, contribute towards the cost of the door opener?

YES

NO

NEEDS/ABILITIES ASSESSMENT

Following your application, a TIL representative may ask for a video of you entering/exiting your door to assist with assessment. We may also ask for photos of your door (internal/external) to assist the door opener company.

Will you be willing to provide such videos/pictures if asked?

YES

NO

How do you currently enter and exit the door in question?

Where, in your home, is the door in question located? (front door, back door, suite door, garage, etc)

What is your living situation? (alone, with family, in an apartment, in a house, in a facility, etc)

What alternatives to an automatic door opener have you considered? (smart door lock, modified door handle, etc)

*If you are deemed ineligible for a TIL door opener, a TIL representative will be in contact to assist you in finding an alternative solution to your door opener challenges.

APPLICATION SUBMITTED BY:

Applicant	By entering my email address, and submitting this application using the same email address, I agree with all conditions outlined below. EMAIL ADDRESS:
Referring Therapist	By entering my email address, and submitting this application using the same email address, I confirm that I have discussed with the applicant all conditions outlined below, and the applicant has agreed with all conditions outlined below. EMAIL ADDRESS:

APPLICATION CONDITIONS

- I understand that, due to the complexities of having a door opener installed, along with required consent forms, there may be a delay in getting a door opener installed. A TIL representative will assist me in gathering all required information, but should my information change during the application process, I must immediately notify Technology For Living of the changes that affect my application.
- I understand that only **one** door opener will be provided to me as part of the TIL Door Opener program.
- I understand that if I should move residences, I will need to pay to have the door opener removed and installed in my new residence. (before applying, TIL recommends you reside in a home you foresee yourself living in for many years, as door opener moves can be expensive).
- I understand that, after the **one** year warranty period, I am responsible for all door opener repair costs moving forward. (TIL does not cover costs associated with the repair of door openers) Also, I understand that warranty does not cover damage associated with neglect of the door opener...these costs would need to be covered by myself.
- I understand that if I rent, lease, own a strata lot, or live in a facility, I must receive written approval from the building manager or strata council prior to door opener installation. (A TIL representative will guide you through the information required from building managers and strata councils.)
- I consent to TIL sharing my contact information (name, telephone number, email and address) with the company that may be installing an automatic door and with an electrician who may be performing the electrical work to power the door. I agree to proceed prior to installation and to be contacted in association with this project when required.
- I agree, after installation of the door opener (if approved), to provide TIL with a quote regarding the affect the automatic door opener has on my independence within my home. (pictures greatly appreciated)

APPLICATION SUBMISSION AND NEXT STEPS

Upon completion of this application addendum, please submit, email, fax, or mail to:

TECHNOLOGY FOR LIVING
#103 - 366 East Kent Ave South
Vancouver, BC V5X 4N6
Fax: 604-326-0176
Email: til@technologyforliving.org

After submitting your application for a TIL Door Opener, a TIL representative will be in contact with the applicant to guide them through the steps required (ie: consent forms, pictures/videos, etc) as part of the TIL Door Opener process.

We look forward to being of service to you and your care team!