



### Participant/Owner Agreement

I agree to the final determination of the proposed modification plans provided to me in writing by the contractor and the Environmental Modification provider.

I understand that I am responsible for the maintenance of and repairs to the environmental modification or vehicle modification.

I understand that I must retain a copy of any warranties and be familiar with their content.

I understand that I am responsible for upgrading my homeowner's and/or car owner's insurance to include the modification.

I understand that the New York State Department of Health is not (financially) responsible for contractor failure.

I understand that it is my responsibility to resolve any problems that might arise directly with the contractor.

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Participant Name	Signature	Date
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Legal Guardian (if applicable)	Signature	Date
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Authorized Representative Name (if applicable)	Signature	Date
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#### Upon Completion of the Modification:

I agree that the work has been satisfactorily completed.

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Participant Name	Signature	Date
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Homeowner/Vehicle Owner (if other than participant)	Signature	Date
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