

DISABILITY SERVICES
RESOURCE CENTER



-Serving People With Disabilities Since 1933-

**HOMEOWNER'S CHECKLIST
FOR RAMP REQUEST**

DO I OWN MY HOME?

IF REQUESTED, CAN YOU PROVIDE PROOF OF OWNERSHIP (DEED AND/OR MORTGAGE STATEMENT)?

HAVE I FILLED IN ALL THE BLANKS ON THE RAMP APPLICATION?

DO I HAVE THE DOCTOR'S PRESCRIPTION STATING MY DIAGNOSIS AND THE NEED FOR A RAMP?

- PRESCRIPTION MAY BE DROPPED OFF WITH YOUR APPLICATION OR YOUR DOCTOR CAN FAX IT TO 989-895-3917. IF YOUR PRESCRIPTION IS FAXED IN **YOU** WILL NEED TO CALL DSRC TO BE SURE WE RECEIVED IT. YOU MAY ALSO EMAIL IT.

DO I HAVE PROOF OF INCOME FOR **ALL** PERSONS LIVING IN MY HOME? (IN THE FORM OF A TAX RETURN AND/OR SOCIAL SECURITY BENEFIT LETTER AND/OR SSI STATEMENT AND/OR PAYCHECK STUB AND/OR SPOUSAL SUPPORT AND/OR PENSION STATEMENT)

HAVE I SUBMITTED & SIGNED THE LIABILITY RELEASE FORM?

HAVE I CALLED DSRC ABOUT ANY QUESTIONS I HAVE (989-895-5444) AND/OR TO VERIFY THEIR RECEIPT OF THESE DOCUMENTS IF EMAILED OR FAXED?

PROOF OF ADDRESS? (IN THE FORM OF ID, DRIVER'S LICENSE OR UTILITY BILL)

HAVE I TAKEN OR SENT THESE DOCUMENTS TO:

DSRC, 1820 N. TRUMBULL DRIVE, BAY CITY, MI 48708-5444

OR EMAILED THEM TO DSRCBC@GMAIL.COM AND CALLED TO VERIFY RECEIPT OR FAXED THEM TO DSRC AT 989-895-3917 AND CALLED TO VERIFY RECEIPT

Updated 4/1/21