

CILNM

Ramp

Project
Application

The Center For Independent Living of Northeastern Minnesota

- **CILNM believes that all people should have access to their homes and communities.**
- **If you need an access ramp, we'd like to help.**
- **Your ramp will be provided to you at cost and will be built by local volunteers.**



**Please complete the Modular Ramp Application Form
and return to:**

**CILNM
2104 East Sixth Avenue
Hibbing, MN 55746**

Your name will be placed on a waiting list
just as soon as we receive your application.

If you have questions, please call (218) 262-6675



If you require this information in an alternative format –
such as audio, large print, Braille – please contact us. (800) 390-3681



Modular Ramp Application

CILNM believes that all people should have access to their homes and communities. Based upon this belief we have developed a sliding fee scale for private parties in need. The sliding fee scale is not available for organizations.

Name: _____ Date: _____

Date of Birth: _____ Age: _____ SS# _____ - _____ - _____

Address: _____ City _____, MN Zip _____

County _____ Phone (218) _____

Gender _____ M _____ F Disability _____

Are You:

_____ White (Not Hispanic) _____ Black (Not Hispanic) _____ Hispanic
 _____ American Indian or Alaskan Native _____ Asian or Pacific Islander

Household Composition:

Please indicate all persons living in your home.

Name	Date of Birth	Relation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

For the past year, what was your total family income before taxes for all members of your household? Please check the appropriate response across from your family size.

All waiver services, insurance and other second party payors must pay invoice in full upon receipt.

Family Size

Family Income

1 Member	_____ \$8,980 or Less	_____ \$8,980 - \$11,674	_____ \$11,675 or more
2 Members	_____ \$12,120 or Less	_____ \$12,120 - \$15,756	_____ \$15,757 or more
3 Members	_____ \$15,260 or Less	_____ \$15,260 - \$19,838	_____ \$19,839 or more
4 Members	_____ \$18,400 or Less	_____ \$18,400 - \$23,920	_____ \$23,921 or more
5 Members	_____ \$21,540 or Less	_____ \$21,540 - \$28,002	_____ \$28,003 or more
6 Members	_____ \$24,680 or Less	_____ \$24,680 - \$32,084	_____ \$32,085 or more
7 Members	_____ \$27,820 or Less	_____ \$27,820 - \$36,166	_____ \$36,166 or more
8 Members	_____ \$30,960 or Less	_____ \$30,960 - \$40,248	_____ \$40,249 or more

Why Do You Need A Ramp? _____

Additional Comments or Exceptional Situation: _____

Do You Need Assistance With Other Housing Needs? Please Explain:

Do Not Fill in Shaded Area - Lead Carpenter will explain and fill in amounts

Number and Size of Modules:

_____ 5' Starter Modules at \$210 ea	\$ _____
_____ 5' Modules at \$360 ea	\$ _____
_____ 5' x 5' Modules at \$450 ea	\$ _____
_____ 5' x 8' Modules at \$675 ea	\$ _____
_____ 10' Modules at \$600 ea	\$ _____
_____ Other:	\$ _____

Total Ramp Cost Installed: \$ _____

Lead Carpenter Signature

Ramp Renter Signature

Sliding fee scale monthly rental charge is as follows:

Category #1 \$2 per module Category #2 \$5 per module Category #3 \$10 per module

There may be additional scholarships available for some consumers. If you cannot make the monthly payment please call the Center For Independent Living of NE MN to explain your situation.

This is a rent to own program, once the ramp is paid in full, the contractee will own the ramp; however, if the ramp is removed prior to this, the contractee has no rights to said ramp.

Ramp Rental Cost

Initial One Time Charge (First Month's Rent Plus \$50 Deposit): \$ _____

Montly Rental Charge Based Upon Income \$ _____

Date Ramp Was Completed: _____

Date of Inspections: _____

Rental Agreement

1. I understand that this ramp will be available to me for up to six months. If there is an ongoing need for this ramp, I agree to renew this agreement, purchase the ramp, or arrange to return the ramp.
2. I am responsible for the ramp. I will make sure that it is not damaged or stolen. If it is, I will report it to the Center for Independent Living of Northeastern Minnesota (CILNM). I will also report any ramp repair or maintenance need to CILNM. I understand that I may not stain or paint the ramp until I own it.
3. I understand the ramp that I receive must be returned if:
 - I move to another home.
 - There is no longer a need for the ramp.
 - I purchase another ramp that better serves my needs.
 - I become delinquent in my rental payment of more than 60 days.
4. I understand that I cannot sell, give away, or loan this ramp to anyone else.
5. I understand that if I decide to purchase this ramp, 1 through 4 do not apply to me, and I will assume all repair and maintenance costs.
6. I understand that the modular ramp design complies with the State Building Code and that their design is determined to be sound. I also understand that volunteers will be utilized to build and set up to make this ramp available to me. I acknowledge that I have been advised of the risks involved in using such a temporary means of access, and agree to use this ramp under these conditions and only with assistance. I hereby release by my signature below, any and all liability by the Center for Independent Living, project volunteers, or any other associate of this community goodwill project, for any injuries incurred while using this ramp.

Signature

Date

Signature

Date