



Texas Home Modification Services, LLC

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Modification Referral Form

(Procedure Code: S5165)

This form may be found at: <http://www.thms-texas.com/homemods>

Referral Checklist

- To refer a home modification request, please complete this form and return by email or fax.
- THMS Construction will contact member and schedule an appointment upon receipt of referral. Upon completion, estimate will be returned by email or fax, to requestor.

Sender Information

Company Name: _____

Date: _____

Contact Name: _____

Phone: _____

E-mail: _____

Fax: _____

Job Information

Member Name: _____

Date of Birth: _____

Member ID#: _____

Phone: _____

Job Address: _____

Alt Phone: _____

City, State Zip: _____

Homeowner: ☐ YES ☐ NO

Modifications Requested

☐

Ramp – Wood

☐

Grab Bar(s) - Shower

☐

Floor Repair – Kitchen

☐

Pedestal Sink

☐

Ramp – Modular

☐

Grab Bar(s) – Commode

☐

Floor Repair – Bathroom

☐

ADA Commode

☐

Bathtub/Shower
Conversion

☐

Door Widening

☐

Floor Repair – Other
(Explain)

☐

Other (Explain)

Other: (Please Describe)

Additional Information