



Easy Living Home Elevators NDIS Service Agreement

This **Service Agreement** is for name: _____, a participant in the National Disability Insurance Scheme, and is made between:

NAME OF: Participant / Participant's representative – if involved (such as a family member or friend)

and

Provider

Easy Living Home Elevators Pty Ltd

This Service Agreement will commence on ____ / ____ / ____ until installation of elevator is completed.

The NDIS and this Service Agreement

This Service Agreement is made for the purpose of providing supports under the Participant's National Disability Insurance Scheme (NDIS) plan. *A copy of the Participant's NDIS plan is attached to this Service Agreement.*

The Participant's NDIS plan is expected to remain in effect during the supply of the elevator. The *Participant / Participant's representative* will immediately notify Easy Living Home Elevators if the Participant's NDIS Plan is replaced by a new plan or the Participant stops being a participant in the NDIS.

Schedule of supports

The supports provided under this Service Agreement: (circle applicable support)

Home Modification / Personal Mobility Equipment / Assist Prod-Pers Care/Safety

Total cost of this support: \$ _____

This Service Agreement must be read in conjunction with our tender/order confirmation in addition to our Standard Conditions of Contract.

Additional expenses are the responsibility of the *Participant / Participant's representative* and is not included in the cost of the supports. Easy Living Home Elevators have not included for any architects fees, building application or design application fees, or any building works for the project including those outlined in the "works by others checklist".

Payments

Easy Living Home Elevators will seek one of the following methods of payment:

If the Participant has chosen to self-manage the funding for NDIS supports provided under this Service Agreement OR If the Participant's Plan Nominee/Registered Provider manages the funding for supports. Easy Living Home Elevators will send the invoice for the Participant/ Participant's Plan Nominee/Registered Provider to pay. Invoice will be paid as per our program and payment schedule.

OR

The Participant has nominated the NDIA to manage the funding for supports provided under this Service Agreement. Easy Living Home Elevators will claim payment from the NDIA.

Contact details

The *Participant / the Participant's representative* can be contacted on:

Name of Participant	
Name of Representative (if applicable)	
NDIS number	
Phone	
Mobile	
Email	
Address of participant	

Easy Living Home Elevators can be contacted on:

Contact name	
Phone	
Mobile	
Email	
Address	

Agreement signatures

The Parties agree to the terms and conditions of this Service Agreement.

Signed by *Participant / Participant's representative*

Name of Participant / Participant's representative

Date

Signature of authorised person from Easy Living Home Elevators

Name of authorised person from Easy Living Home Elevators

Date