



Housing Authority of the Cherokee Nation
1500 Hensley Drive
P.O. Box 1007
Tahlequah, OK 74465-1007
Phone 918-456-5482



Homeowner, Debra McGrath accepts/declines the required specifications for Handicap Assessability, for Housing Program (New Construction or Rehab).

Items Listed:

GRAB BARS AT TOILET:

☒ Accept / Decline ☐

GRAB BARS AT TUB/SHOWER:

☒ Accept / Decline ☐

HIGH RISE TOILET

☒ Accept / Decline ☐

ADA SHOWER W / TRANSFER:

☒ Accept / Decline ☐

ENTRY DOORWAY OF 36":

☒ Accept / Decline ☐

RAMP:

☒ Accept / Decline ☐

WALL HUNG VANITY:

☒ Accept / Decline ☐

VISUALLY IMPAIRED (BLIND)

☐ Accept/Decline ☒

HEARING IMPAIRED (DEAF)

☐ Accept/Decline ☒

OTHER _____

☐ Accept/Decline ☐

Homeowners agrees and understands the above and NO other changes will be made after this date.

Debra McGrath 6/26/24
Homeowner: Date:

Rodney G. Cannon 6/26/24
Inspector: Date:

HOUSING REHAB
SITE EVALUATION

Name: Deborah McGrath Address: 406 Iola Ave. Sallisaw Ok.
Phone: 918-571-8640 County: Sequoyia 74955
Directions: _____

(CHECK ALL THAT APPLY TO THE SITE)

____ Handicap (yes or no)
____ Existing Certified Septic System/Drainfield
____ Perc Test or Soil Test (attach)
____ New Septic System or Aerobic System (Circle One)
____ Survey (attach)
____ Plat (attach)
____ Drill Well

Name City Utilities Sallisaw Rural Utilities _____
Electric Company Creyol Sallisaw How far from Site: _____
Gas Company _____ How far from Site _____
RWD Name: _____ How far from Site _____
____ Environmental Report Requested ____ Environmental Issues, noted below

Notes: _____

Attach:

House plans

Cost Estimator: Richard D. Cannon 6/26/24

Signature

Date

