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|  | **ENAH102** | **HOUSING MODIFICATION CONCEPT SKETCH**  **moh.processing@enable.co.nz 0800 171 995** | | |
| ***To be completed by the EMS Assessor*** | | | ***Choose One***  **Existing Environment** | **Proposed Modification**  **ENAH1002** |

| **Client Name** |  | **EMS Assessor** |  | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | **Notes** | | |
|  | | | | | * **clear description of identified works.** * **sizes, dimensions make or model of equipment.** | | |
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| **DRAWING IS TO SCALE** | | | | **Client Initials** | |  | **Initial Here** |
| **DRAWING IS NOT TO SCALE** | | | | **Property Owner Initials** | |  |  |
|  | | | |  | |  |  |