附件3

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | **新港街道残疾人家庭无障碍改造专项提升服务需求清单** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | |  | |  | |  | |  |  | |  | |  | |  | |  | |  | |  | |  | |  |  | |  | | |
| **服务项目** | **肢体类残疾人家庭申请改造服务项目** | | | | | | | | | | | | | | | | | | | | | | | | | | **智力、精神类残疾人家庭申请改造服务项目** | | | | **视力类残疾人家庭申请改造项目** |
| **地面平整硬化（单位：处）** | **楼梯加设扶手（单位：个）** | | **室内过道加设扶手（单位：个）** | | **铺设防滑地板（单位：处）** | | **蹲厕改坐厕（单位：个）** | | **安全扶手或抓杆（单位：个）** | **活动座厕（单位：个）** | | **报警按钮（单位：个）** | | **灶台低位改造（单位：个）** | | **橱柜低位改造（单位：个）** | | **洗涤盆低位改造（单位：个）** | | **低位电源开关改造（单位：个）** | | **折叠式浴室洗澡椅（单位：个）** | | **户门加宽（单位：个）** | | **改造家庭室内电源线路（单位：处）** | **安装高位遥控开关（单位：个）** | | **安装安全防护网（单位：处）** | **电器声控开关（单位：个）** |
| **数量** | **2** | **5** | | **2** | | **8** | | **11** | | **11** | **4** | | **0** | | **3** | | **1** | | **0** | | **2** | | **1** | | **2** | | **6** | **1** | | **18** | **1** |
| **规格** | **有国家标准的执行国家标准；无国家标准的，由服务商根据实际情况与申请家庭商定。** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **说明** | **1.残疾人姓名、住址、电话等信息属个人隐私，不予公告。 2.残疾人有关涉密信息，待服务商签订《保密承诺书》后方可接触。 3. 以上服务项目包含全街61名残疾人申请家庭无障碍改造项目，每个残疾人家庭申请项目从1个到多个项目，每户改造不超过5000元。** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |