

State of New Mexico Commission for Deaf & Hard of Hearing

505 Marquette NW, Suite 1550 - Albuquerque, NM 87102

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Website: www.cdhh.state.nm.

PLEASE TYPE OR PRINT ALL INFORMATION

Mr. Mrs. Ms. Dr. Other: Primary Form of Communication: ASL Spanish English

First Name _____ Last Name _____

Mailing Address _____

City _____ County _____ Zip Code _____

Physical Address _____

City _____ County _____ Zip Code _____

Phone Number _____ Voice VP TTY

Email Address _____

Date of Birth _____ Social Security Number _____

HIPAA REGULATIONS

This application and subsequent file contains protected health information, and is confidential under HIPAA regulations. The NMCDHH will not discuss the status of your application or any information contained in your file with anyone unless you give your permission by listing the individual below. If you wish to authorize more individuals, please list their names, contact information and relationship on a separate piece of paper with your initials, and attach to this application.

First Name _____ Last Name _____

Mailing Address _____

City _____ County _____ Zip Code _____

Phone Number _____ Voice VP TTY

Email Address _____

Relationship to applicant _____

SELF IDENTIFIED DISABILITY

You must be Deaf, Hard of Hearing, Deaf-Blind or Speech Disabled to qualify for the Telecommunications Equipment Distribution Program.

Deaf

Hard of Hearing

Deaf-Blind

Speech Disabled

APPLICANT INCOME GUIDELINES

Applicant's gross household income must be less than \$50,000 per year to qualify for the program. Gross household income includes wages, Social Security and/or pension income if applicable. If the applicant has no income, please write NONE.

The Applicant's Yearly Gross Household Income is:

By signing below, I certify I have a gross household income equal to or below \$50,000 annually. I also acknowledge NMCDHH reserves the right to request a copy of my federal tax return at a later date if needed.

SIGNATURE _____

EQUIPMENT SELECTION

Please select ONE Primary Device (either ONE Telephone or ONE iPad®) and up to TWO Accessories.

TELEPHONES - Please select ONE landline phone (Primary Device)

Mild-Moderate (Page 8-9)

BT-914	D704	D714	JV-35	KX-TGM430B
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Moderate-Severe (Page 10-12)

Alto	Alto Plus	XLC2+	XLC7BT	XLC8	A1600BT	CSC600ER
Ampli550	KX-TGM450S					

Profound (Page 13)

CapTel 840				
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Speech Assistive Devices (Page 20)

Emote™			
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iPads - Please select ONE iPad® (Primary Device) (Page 14-19)

iPad®

iPad mini®

iPad®	32GB, WiFi Only (Black) Viewing Area 10.2-inch (diagonal)	iPad mini®	64GB, WiFi Only (Black) Viewing Area 7.9-inch (diagonal)
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ACCESSORIES - Please select up to TWO accessories (Page 21-31)

Notification Systems	Smoke Alarms	Telephone Ringers	Answering Machines	Neckloops	Phone Amplifiers	Bluetooth®
CA-360	Medallion Kit	RF-200	ANS3000	NL100	UA-45	CE50
CA-380		SR100		Mino	HA40	QT PRO
HA360MKBR		CR200		BE9159	WIL95	SA-40
HA360BRK		RA05		CE50		
				Duett		
				LH10PK		
				QT PRO		

iPhone and iPad are trademarks of Apple Inc., registered in the U.S. and other countries. iMessage® and FaceTime® are registered trademarks of Apple Inc. The OtterBox name and OtterBox trademarks are the property of Otter Products, LLC, registered in the U.S. and other countries. All other trademarks are the property of their respective owners.

TERMS & CONDITIONS

Equipment Agreement:

- All equipment loaned through this program is the property of the State of New Mexico.
- One primary communication device (a phone or an iPad®) and up to two accessories are on loan to a household unit.
NOTE: one primary communication device – an iPad® or a phone may be chosen
- All equipment is on loan for you to use.
- If the equipment provided has decreased in its ability to meet your communication needs after three years, you may apply for a new item.
- The equipment on loan to you from the State of New Mexico may not be sold, traded or given to anyone.
- If you are moving out of state, all equipment on loan must be returned to NMCDHH or to Teltex. You are responsible for returning all equipment before moving.
- If you do not use the equipment loaned to you for an extended period of time for any reason, return the equipment to NMCDHH or to Teltex.
- If there is a change in your disability with documented proof, we will allow you to make an exchange for equipment that best fits the change in your disability. Written proof on a letterhead from a professional with their contact information is required.
- Making unauthorized modifications to the equipment will result in equipment confiscation and a ban from the program.

NMCDHH and Teltex reserves the right to update, change, replace, or discontinue products at its discretion without notice.

Setup, Usage, and Maintenance:

- All equipment comes with manuals and their own items.
- Do not throw away. If you need assistance, you can contact Teltex. Their contact information is shown below in the section labeled “Assistance”.
- You are responsible for using and maintaining the equipment properly.
- You are responsible for setting up your equipment.
- If you receive an iPad® from the program, you are responsible for creating your own Apple ID and Password.
- You are responsible for purchasing batteries or other supplies required for normal use of the equipment.

If your equipment is nonfunctional:

Broken or Damaged:

- If your equipment is broken or damaged through misuse or negligence, you are financially responsible for ALL costs related to repairing or replacing the equipment at the current retail value.
- If your equipment was broken or damaged during shipping, please contact Teltex immediately.

Fire or Theft:

- If your equipment has fire damage or is stolen, you are responsible to provide the TEDP with a copy of the police or fire department report. TEDP will evaluate the reports before determining whether to issue replacement equipment.

Lost:

- If your equipment is lost you are financially responsible for ALL costs related to replacing the equipment at the current retail value.

Assistance

Teltex is our equipment distribution partner so they are your primary contact for any of these following reasons:

- Setting up assistance
- Guidance on using equipment
- Technical Support
- Troubleshooting
- Problems
- Repairs

Contact information:

- Phone: 888-515-8120
- Email: info@teltex.com
- Website: <https://teltex.com/contact-us/>

Teltex and NMCDHH does not make house calls or visits.

You will be financially responsible for shipping equipment to Teltex.

- NMCDHH does not do equipment repairs.

TERMS & CONDITIONS (Continued)

Special iPad® Instructions

- ✓ Upon approval the iPad® will be shipped to your home.
- ✓ It will arrive with the device and with the approved case in a special shipping box **(KEEP THIS BOX)**
- ✓ The iPad® must stay in the approved case at all times.
- ✓ The iPad® is laser etched with “Property of the State of New Mexico Commission for Deaf & Hard of Hearing”.
- ✓ If the equipment is found at a pawn shop, on Ebay, on Craigslist or another venue, you will be banned from the iPad® Program.
- ✓ One iPad® and case is available per client with a maximum of 2 per household.
- ✓ The equipment is on loan to you.
- ✓ The iPad® you are receiving is for telecommunications and communications purposes ONLY.
- ✓ The iPad® will be shipped to you preloaded with telecommunications and communications applications specific to your self-identified disability.
- ✓ If you “Jailbreak” (circumvention of the operating system to enable interoperability of non-vendor approved software applications) your iPad®, you will be banned from the TEDP.
- ✓ Jailbreaking is a violation of the terms and conditions.
- ✓ The iPad® will have a web filter installed that will prohibit access to websites with adult content.
- ✓ You are responsible for properly using and maintaining the equipment. Any unauthorized modifications will result in confiscation of the equipment and expulsion from the TEDP.
- ✓ Email ios@teltext.com for email support.
- ✓ Visit www.iAccessibility.com for basic operational and instructional videos.

DO NOT contact Apple directly or take the iPad® to an Apple Store

Required Documents and Signature

Please check **ALL** boxes below. If **ALL** of the following documents **are not provided or included** with this application there **will** be a delay with your equipment request.

Proof of Telephone or Internet Service included with application

Provide a copy of a recent landline or wireless telephone bill or cable bill showing the applicant’s name. If the telephone bill is not in the applicant’s name, provide a copy of the bill and a statement from the account holder acknowledging the applicant has access to the telephone line.

Proof of New Mexico Residency included with application

Provide a copy from one of the following item:

New Mexico Driver’s License, State ID Card, gas, electric or water bill.

NOTE: Bill MUST have applicant’s name and current street address. A PO Box will not be accepted.

Proof of Hearing or Speech Loss included with application

Copy of an audiogram or speech evaluation (on letterhead) verifying hearing or speech loss. The applicant’s name MUST be on the documentation. For individuals who are Deaf, documentation such as a copy of a School for the Deaf diploma or Vocational Rehabilitation documentation will be accepted.

NOTE: We will NOT accept documentation stating a percentage of hearing loss.

Applicant Signature

By signing the form below, I read and agreed to the Terms & Conditions mentioned above to receive the equipment. If the form is not signed and dated, the application will be on hold.

SIGNATURE _____ DATE _____

Signature of Parent or Guardian (If under 18 Years of Age) _____