



Help for Children with *Asthma*

Who is eligible for services?

- Children less than 18 years old with asthma
- Low-moderate income households in:
 - Ingham County: **EVERY** ZIP Code within Ingham County
 - Eaton County: **Only** ZIP Codes **48906, 48911 and 48917** within Eaton County
 - Clinton County: **Only** ZIP Code **48906** within Clinton County

What is the cost?

- **FREE**

What help is available?

- We will inspect your home and install products to reduce asthma triggers and prevent injuries.
- We will provide any education that you may need to help reduce asthma triggers within your home.

Basic Products for EVERY Family

- | | |
|--------------------------------|---------------------------------------|
| ▪ Outlet safety plugs | ▪ Carbon monoxide and smoke detectors |
| ▪ HEPA vacuum | ▪ Cabinet safety locks |
| ▪ Door mats | ▪ Skid proof bath mat |
| ▪ Fire extinguisher | ▪ Gun trigger locks |
| ▪ Mercury-free thermometers | ▪ Trash can with lid |
| ▪ Plastic food containers | ▪ Smoking cessation kits |
| ▪ Nightlights and flashlights | ▪ Fans |
| ▪ Green cleaning supplies | ▪ Pillow and mattress covers |
| ▪ Pest gels and baits | ▪ Foam crack sealant and caulk |
| ▪ Shower curtains | ▪ HEPA Room Filters |
| ▪ Mini-blind cord wind-ups | ▪ Step stool |
| ▪ Low-allergen furnace filters | ▪ Child safety gate |

Custom Products/Services for ELIGIBLE families

- | | |
|------------------------------------|---------------------------------------|
| ▪ Bed, pillows and mattresses | ▪ Gutter Installation/repair |
| ▪ Dehumidifier | ▪ HVAC maintenance and repair |
| ▪ Moisture control | ▪ Plumbing repairs |
| ▪ Minor roof repairs | ▪ Yard grading |
| ▪ Carpet removal | ▪ Garbage removal |
| ▪ Flooring replacement | ▪ Lead-based paint cleaning kits |
| ▪ Bathroom vent installation | ▪ Bush removal/landscaping |
| ▪ Integrated Pest Management (IPM) | ▪ Outdoor play equipment improvements |
| ▪ Window air conditioning unit | ▪ Dryer vent repair/installation |

Getting started is easy!

If you would like an application mailed to you, just complete the information requested below and return this sheet by **mail, fax or e-mail**. You can also print an application online from our website at www.michigan.gov/leadsafe.

Name: _____

Address: _____

City, State, Zip: _____

Phone/Email: _____

Referred by: _____

If you are interested in referring families, please contact:

Courtney Wisinski
Linda Stewart
MDCH-Healthy Homes Section
P O Box 30195
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