

The Recovery Houses of Arbor Place, Inc.

Arbor Place, Inc. is pleased to offer recovery houses for men and women who will benefit from a living environment developed to support them in early recovery from alcohol and/or drugs. Arbor Place is dedicated to providing a comfortable sober living environment by holding our residents accountable and expecting them to act responsibly. Length of stay can range from three to twenty-four months. The following items are available for both houses:

- Off street parking
- Nice outdoor areas to include volleyball, horseshoes, basketball hoop, campfire ring
- Great location close to Arbor Place Treatment Center, Menomonie Alano Club, Medical Care Providers, Dunn County Job Center, Chippewa Valley Technical Center, Various Financial Institutions, Fitness Centers, Restaurants, and Grocery Store in very close proximity to open in 2017. UW-Stout campus is walkable or a great bike ride distance.

The Male House

- Three single occupancy bedrooms
- Three double occupancy bedrooms
- Three bathrooms
- Kitchen, Dining Room, Living Room, Laundry Washer & Dryer, Patio Area, Computer Work Space
- Complete remodel completed in 2016 and includes all new flooring, fresh paint, new appliances, light fixtures, new furnace, central air conditioning

The Female House

- Two single occupancy bedroom
- Three double occupancy bedrooms
- Two bathrooms
- Kitchen, Dining Room, Living Room, Laundry Washer & Dryer, Patio Area, Computer Work Space
- Complete remodel completed in 2016 and includes all new flooring, fresh paint, new kitchen cabinets and appliances, light fixtures, new furnace, central air conditioning, all new windows

Pricing

Application & Deposit Fee of \$250 – This fee must be paid after the applicant has been accepted as a tenant, and before move-in occurs. Of the deposit, \$100 is a non-refundable admission fee. Funds will be deducted from the remaining deposit to cover late fees, damage to property, and/or laboratory drug testing.

Double Occupancy Bedroom is \$400 per month – The first month of occupancy, the fee may be paid on a weekly basis if necessary. However, the beginning of the second month, the full month's rent is due on the 1st of the month.

Single Occupancy Bedroom is \$500 per month – No tenant is eligible for a single bedroom until they have been a resident for a minimum of 30 days and is approved by management. The full month's rent is due on the 1st of the month.

Rent Fee includes:

- All utilities (electricity, heat, water, garbage service)
- WiFi and Cable
- Local telephone
- Onsite free laundry
- Some Food staples such as milk, condiments, bread, etc.
- Some Cleaning supplies and household products including toilet paper, paper towels, garbage bags
- Onsite staff for monitoring, accountability, and assistance
- Streamline referral for substance abuse and mental health treatment services at Arbor Place, Inc.
- Additional support services currently being explored and *may* be available in the future - job search assistance, recovery coaching, peer specialist services

Late Fee

Rent fees must be paid on the 1st of the month. A 5-day grace period can be granted if a written request is submitted to management prior to the first of the month. Any payments received after midnight of the 5th day of the month will result in a \$30 late fee being assigned. This fee will be deducted from the deposit. If a tenant is more than 7 days late in paying their monthly rent, management will move forward with eviction.

What is a Recovery House?

A Recovery House is a residence that provides a drug and alcohol-free environment for newly sober people that has expectations to support people work an individual recovery program. Sometimes people call a Recovery House a Halfway House or Sober Living unit. However, there are certain distinctions. A Halfway House is a licensed program (called Transitional Residential Treatment) that is required to provide 3-11 hours of counseling per week. Sober Living units implies people just have to be sober. Our Recovery House encourages residents to work a recovery program while maintaining sobriety. We connect our residents to professional services when it is beneficial and necessary, but no clinical services are delivered onsite. Transitioning to a recovery house is a beneficial step after completing inpatient/residential treatment, or while enrolled in an outpatient treatment program. Recovery houses can be a bridge between the support of a treatment center and the temptations of the "real world."

The Recovery Houses of Arbor Place, Inc.

Resident Application

To be accepted in a Recovery House of Arbor Place, Inc. you must complete this entire application, sign the Expectation Agreement, and be interviewed by Arbor Place, Inc. Staff. An interview including current Recovery House residents may also be conducted. Carefully read the application and honestly answer the questions.

Today's Date _____

Print your full name: _____
First
Middle
Last

Date of Birth: _____

To be eligible to be accepted as a resident, you must have a minimum of 30 days sobriety.

What is the date of your last use of alcohol and/or drugs? _____

To be eligible to be accepted as a resident, you cannot be a registered sex offender.

Are you a registered sex offender? _____

Phone number: _____ Is this your cell # or other? _____

Present address (Street): _____

City: _____ State: _____ Zip: _____

Is this address a treatment facility? if yes, what is the name of the facility?

Social Security Number: _____

Driver's License Number: _____

State DL Issued in: _____ Will you be keeping a vehicle onsite?: _____

If yes, list make/model/license plate: _____

Are you an alcoholic? _____ Date of last drink taken _____

Are you a drug addict? _____ Date of last drug use _____

What is your drug of choice? _____

List drugs you have used within the past 2 years:

When did you attend your first AA or NA meeting? _____

How many meetings do you attend each week? _____

Do you have a sponsor? _____ If yes, list name and phone number

Are you currently on probation/parole? _____ If yes, list name of PO and phone number

Do you have any pending legal charges or cases? _____ If yes, please list:

Are you employed? _____ If yes, who is your employer? _____
If you do not have a job, will you get one? _____

Are you attending school? _____ If yes, where? _____
Are you enrolled full time or part time? _____

What is your monthly income right now? _____
If you are not employed, what is the main source of your income? _____
What do you expect your monthly income to be next month? _____

Marital Status (Married, Never Married, Separated, or Divorced): _____
Do you smoke / use tobacco? _____

Do you have a primary medical doctor or medical clinic? _____
If yes, complete the following:
Medical Clinic: _____
Primary Medical Provider: _____ Phone: _____

Have you ever been to treatment for your addiction in the past 2 years? _____
If yes, please provide the treatment provider(s) and phone number(s):

Have you ever been to a mental health treatment center? _____
If yes, please provide the treatment provider(s) and phone number(s):

Are you currently seeing a counselor/therapist or enrolled in a treatment program? _____
If yes, please provide the treatment provider and phone number:

Are you prescribed any medications? _____ If yes, please list below.

Medication Name	Dosage Prescribed	Prescribing Doctor

Do you have any physical health issues/concerns/limitations? _____ If yes, please list:

When do you want to move in? _____

Have you ever lived in a Recovery House before? _____

If yes, why did you leave before? _____

Please list three emergency contacts with name, relationship and phone number:

Name	Relationship	Phone Number

Application Addendum A

I understand that the Recovery House to which I am applying for residency has been established in part with the conditions of the Federal Anti-Drug Abuse Act of 1988 P.L. 100-690, which requires the house residents to (A) Prohibit all residents from using any alcohol or illegal drugs, (B) Expel any resident who violates such prohibition, (C) Equally share household expenses included within my monthly lease payment, among all residents, and (D) Utilize democratic decision making within the group including inclusion and expulsion from the group.

In accepting these terms, and those set forth in the attached **Recovery Houses of Arbor Place, Inc. House Rules and Expectations Agreement**, the applicant excludes himself or herself from the normal due process afforded by local landlord-tenant laws.

I have read all of the material on this application form including the limitations set forth in Application Addendum A. I have also answered each question honestly and truly want to live a life in recovery from addiction.

Please sign this application if you understand this information.

Signature: _____ Date: _____

Completed Applications can be

Emailed to: jgamez@arborplaceinc.com

Faxed to: 715-235-4535, Attn: Jill

Mailed to: Arbor Place, Inc., Attn: Jill, 4076 Kothlow Ave, Menomonie, WI 54751

Date received by Arbor Place _____

Interview Date: _____

___ Declined Residency Reason: _____

___ Approved Residency

Staff Name: _____

Staff Signature: _____ Date: _____

Recovery Houses of Arbor Place, Inc. House Rules and Expectations Agreement

The following outlines the expectations of you as a resident of a Recovery House of Arbor Place, Inc. You will be held accountable to these expectations by your housemates and staff. The Recovery Houses of Arbor Place, Inc. knows the importance of working a recovery program. As a resident of our Recovery Houses, you'll fulfill these expectations by:

- **Moving forward in your own personal sobriety** by having a sponsor, attending 12-step meetings, working a recovery program, and participating in weekly Recovery House meetings.
- **Being a good housemate** by treating your house and fellow housemates with dignity and respect.
- **Being a clean housemate** by helping out with household chores.
- **Being a responsible housemate** by paying your rent on time.
- **Coming and going as you please**, so long as you come back to your house clean and sober and obtain permission from staff if you'll be gone overnight.
- **Maintaining total sobriety**. The use of any mind altering substances will result in immediate removal from our Recovery Houses.

1. Maintaining and active program of recovery.

- a. Attend minimum of three 12-step meetings per week (including a home group)
- b. Senior peers (min. 1 year sobriety) may attend only 2 meetings per week.
- c. Weekly sponsor contact.
- d. Weekly service/12 step work.
- e. Management may require written proof of compliance if needed.
- f. Participation in weekly house meeting.
- g. Participation in house activities. (No isolating.) Form relationships, eat together etc.

2. Safe peaceful environment.

- a. No resident may interfere with any others quiet enjoyment of the premises.
- b. Courtesy and consideration will be shown regarding the use of TV, radio, and personal stereo devices.
- c. General guidelines on hours (quiet time) will be 10:30 p.m. to 7:00 a.m.
- d. Please be respectful of others work and sleep schedules.
- e. Curfew, first 30 days of residency, 11:00 pm weeknights, 12:00 weekends. After 30 days, 12:00 a.m. weeknights. 1:00 a.m. weekends. (Friday/Saturday)

3. Work/volunteer work/school.

- a. All residents are required to be employed full time. (Minimum 30+ hours/week)
- b. School may be substituted providing residents are enrolled a minimum of 12 credit hours. Part time students shall supplement school with part time work or service work.
- c. Any resident not working or in school shall be actively seeking employment and/or doing service work for a minimum of 30+ hours per week.
- d. Not keeping busy and up and out of the house will not be tolerated.
- e. Any resident not employed or actively seeking employment may be evicted.
- f. A 1-month grace period MAY be granted for those looking for work, depending of course on the effort put forth in seeking employment.

- g. Any change in work/school/service work schedule or status should be processed with the house.
- 4. No lying around or sleeping all day
 - a. General guidelines regarding this are up by 9:00 weekdays, 10:00 weekends.
 - b. Sleeping all day will not be tolerated.
 - c. Lying around all day and not keeping busy will not be tolerated.
- 5. Guests. Guests are welcome and encouraged during normal hours.
 - a. Guests must be limited to 2 at a time.
 - a. No guests are allowed in the resident's rooms. Please keep all guests in the common living areas.
 - b. Residents having guests shall limit such visits to not before 9:00 AM and not after 10:00 PM.
 - c. No overnight guests.
 - d. Limits may be placed on guests if you have guests too often and for too long. This is house is for you and your housemates, not others.
 - e. Guests are not allowed to use showers or laundry machines.
- 6. Staying out (sleeping elsewhere)
 - a. Any resident wishing to stay elsewhere shall limit such stays to no more than one night per week. Residents shall process overnight stays IN ADVANCE with other members of the house AND a house manager or senior peer.
 - b. Last minute notifications of staying elsewhere will not be tolerated.
 - c. Residents must inform management of their whereabouts, where they can be reached, and when they will return.
 - d. Trips, vacations, or overnight stays out during first 30 days is not allowed.
- 7. All residents of the house will be accountable to each other and to management as to their whereabouts.
- 8. House meeting.
 - a. All residents are required to attend all weekly house meetings.
- 9. House Cleaning / Chores
 - a. All residents are expected to keep the house clean and neat.
 - b. Weekly chores will be assigned at each week's house meeting. (See weekly cleaning sheet/board)
 - c. Keep personal items out of public areas
 - d. Keep personal space clean, neat, and presentable at all times.
 - e. Dishes are not to be left in the sink. Do your dishes after you use them!
 - f. Any resident not meeting this expectation will be evicted.
 - g. Please help keep OUR houses nice and neat so they are desirable places to live. Take pride in your house.
 - h. This takes a consistent, concerted effort by all members. Work together.
- 10. Food.
 - a. Do not eat other people's food. Label food if necessary.
 - b. Residents are strongly encouraged to eat together whenever possible.
 - c. Do not eat in bedrooms
 - d. Clean up after you prepare food.
- 11. Medications.
 - a. No mouthwash with alcohol

- b. Medications shall be kept on a personal lock box and not left out for all to see.
 - c. Follow all doctors' orders regarding medications.
 - d. Failure to follow doctors' orders in taking medications will result in eviction.
 - e. Any abuse of over the counter medicines will result in eviction. This is using behavior and will not be tolerated.
 - f. Keep management informed of any newly prescribed medication.
12. Gambling is not permitted
13. Compulsive sexual behavior is not permitted
- a. Any Internet sex, browsing of Internet sex sites, pornography or any such other behavior or material is strictly prohibited.
14. Personal space
- a. Lack of respect for others personal space and/or personal boundaries will not be tolerated. Do not go into others room without their permission.
 - b. Do not borrow others possessions without permission
 - c. Do not loan money or borrow money from other residents. This leads to problems.
 - d. Do not loan cars.
15. Smoking
- a. Both houses are **non-smoking** residences. **This includes E-Cigarettes. There is no smoking in the house anywhere at any time. We encourage everyone to quit smoking, as it is another addiction that will lead to death.** If individuals still chose to smoke, all smoking shall be done outside only in the designated area and cigarette butts need to be disposed of properly.
16. Unsafe Behaviors and Activities
- a. Management has the right to conduct room searches or enter your room without your permission, if there are concerns about your safety or the safety of others.
17. Termination of housing agreement
- a. Management reserves the right to terminate this housing agreement at any time for any reason.**
 - b. Residents are required to provide 30 day written notice of intent to leave.
 - c. Failure to provide 30-day notice will result in loss of security deposit.
 - d. Termination of residency, for any reason, will result in the loss of deposit and all monthly rent that has already been paid.**
18. Also, in order for us to maintain a safe and sober living environment for all of our residents, the staff of Arbor Place, Inc. may take the following actions:
- a. Random alcohol and drug testing** as deemed necessary by the staff. Refusal to conduct a breathalyzer or drug screen will be considered a relapse.
 - b. In the event of a positive alcohol or drug test**, the resident will be asked to leave the Recovery Houses until a drug test is passed. After a clean test and a review with management, a resident may either be reinstated or refused residency at the management's discretion.
 - c. The use of alcohol or drugs** may also result in immediate referral to a healthcare or treatment facility.
 - d. In the event of a removal from a Recovery House**, the resident must collect their belongings immediately. If the resident fails to return to the house, belongings will be gathered and stored for a period of 1 week. After that time, Arbor Place, Inc, will not store or be responsible for any items left behind.

Cause for immediate removal from occupancy of the Recovery Houses of Arbor Place, Inc. shall include, but not be limited to any of the following.

1. Any use or possession of any alcohol or drugs or drug paraphernalia, whether in possession of the person or within the living space of the house. Management reserves the right to drug test any resident at any time for any reason. **Failure to submit to a drug/alcohol test upon request of the management shall result in immediate eviction.** In the event of a false positive, residents are allowed, at their own expense, to provide a urine sample to a laboratory for more comprehensive screening. **Lab charges of \$65.00 for each UA** will be deducted from the deposit.

2. Damage to property, whether personal or house property.

3. Threats/weapons. Any threats, violence, physical or other abuse toward any resident or manager will not be tolerated. No weapons permitted.

4. Drug dealing.

5. **Non-payment of housing fees.** Failure to maintain a current paid status on any fees associated with living at The Recovery House will result in eviction. Rent is due on the 1st of every month. Late charges in the amount of \$30.00 will be charged to all residents who do not pay their rent by midnight of the 5th day of the month. Late fees are deducted from the deposit.

Rental fees are as follows: \$400-\$500/monthly fees and \$250 deposit. \$100.00 of the deposit shall act as a NON-REFUNDABLE administrative entry fee.

5. Failure to maintain an active program of recovery.

6. Failure to meet house expectations.

7. Theft. Any theft of personal or house property shall result in eviction.

8. Other circumstances. Management reserves the right to consider eviction for any reason at his or her discretion.

9. If a person is evicted, they shall **immediately** turn over possession of any and all keys and shall remove all personal property. Removal of personal property will be arranged, and shall be supervised by management.

I have read the House Rules and Expectations and agree to follow all as it is stated. It is my responsibility to know what the House Rules and Expectations are.

I understand management is here to help me follow of recovery and to provide a safe, structured living environment. I understand that being confronted on my behaviors from a caring point of

view is a part of living in this house. I understand that failure to discuss adverse or undesirable behaviors with an open mind without adverse reactions to such discussions may result in eviction.

I understand that by signing this form I release Arbor Place, Inc. from all liability during my participation or resulting from my actions or actions of others while a resident at the House.

Resident's Printed Name _____

Resident's Signature _____

Date _____

Arbor Place Staff Printed Name _____

Staff Signature _____

Date: _____

Weekly Check-in Meeting

I. Manager's issues, concerns and announcements (if any)

II. Interviews of Candidates for residency (if any)

III. Residents' check-in reports:

A. How many AA or NA meetings in past week?/ How many with house peers.

B. What service work done?

C. What sponsor contact?

D. Attending Treatment Appointments?

E. Assigned cleaning chores done?

F. Financial standing with management. (Rent paid?)

G. What am I struggling with / what step am I working/ what triumphs?

H. Status of job or school?

I. What concerns do I have for others?

IV. Assign Chores for Week