



GROUP LIVING FACILITIES Annual Registration for Year _____

Please answer each question as fully as possible. If necessary, add additional pages. Be aware that any items which are answered untruthfully or not completely may put your status in the City in jeopardy. Please answer all questions specific to this particular facility, as opposed to other facilities which may be owned or managed by you.

1. Name of facility: _____
2. Date of registration: _____
3. Date of last registration with the City: _____
4. Physical Address: _____

5. Mailing Address: _____

6. Facility Phone Number: _____
7. Main Contact Name and Phone Number: _____
8. Type of Facility (City Classification):
(Please list the maximum number of residents who may reside in your facility.)
_____ Unlimited (12 or more residents)
_____ Large (9-11 residents inclusive)
_____ Small (4-8 residents inclusive)
9. If the Owner or Manager of the facility has changed within the last year, please include the name of the new Owner and/or Manager. _____

10. Have the number of employees changed during the past year? If yes, please explain. We are only looking for new positions which have been added or any positions which have been discontinued, not the hiring and firing of specific employees. _____

11. Please describe any major changes to the facility itself during the last year, inside or outside. If changes have been made to the outside of the facility which changes the character of the building, please submit a new photograph. _____

12. Has the mission, the purpose or the use of the facility changed within the last year? If yes, please explain the change and the reason for the change. _____

13. Within the past year, has your facility had any violations of any building, fire, health, and/or safety code, or any violations of the City of Grand Junction Zoning and Development Code? Please provide documentation that the facility has passed all of the required inspection for the past year. If there have been any violations, please explain the violation and how it was resolved. _____

14. Have any changes of State or other licensures occurred within the last year? If yes, please explain the change and the reason for the change. Please provide a copy of the current State License for the facility. _____

15. Please provide the following information.

- a. Please provide copies of a "Call for Service Report" for the property and any reports that were written regarding the service calls.
- b. Have there been any security problems during the past year? If yes, please explain and describe how the problem was addressed.

16. Please include any other information which you feel is relevant, which has not been covered by any of these questions. _____
