

13. Women's Financial Agreement

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First Name *

Last Name *

Admission / Intake Date

Month *
Month

Day *
Day

Year *

Payment Remittance Address:

120 Lange Dr
Troy, MI. 48098

Which TDRF Home are you moving into today? *

Select an option

Financial Disclosure - Program Fees and Charges:

I will be required to pay a \$300 Intake fee prior to entry. Note: This fee is non-refundable and DOC will not pay it for me. *

Initials

Program Fee - \$750/month.

Initials

There is a late fee of \$75.00 for payments received after 3 days past due date. *

Initials

I alone am responsible for making sure that my program fees & charges are paid even if it is paid by a 3rd party organization(s). I alone am responsible for reaching out to any 3rd party organization(s) as frequently as needed to obtain and ensure timely payments. *

Initials

If I do not communicate with the TDRF Staff about paying my program fee and are consistently late paying my program fees, I will receive a 3-Day notice to pay or vacate. *

Initials

It is my full responsibility to make sure my program fees are paid on time. ***I understand there are agencies with programs that help with housing funds. I understand it may be necessary to apply at multiple agencies as the approval timelines vary and can take weeks or months.

Initials

Supply Fee - This amount varies as it includes perishable items such as toilet paper, paper towels, hand soap, dish soap, dishwasher pods, laundry detergent, and any cleaning supplies. This fee is estimated to not exceed \$15 per person on an as needed basis and that is dependent on use. Supplies are typically purchased and delivered via Walmart. Receipts will be shared with all residents for transparency and the cost is divided by the number of residents in the house at that time. *

Initials

Refund Policy: If I break any of the TDRF rules and/or are asked to leave, there is no refund. *

Initials

If I am put in jail by my DOC officer, TDRF may choose not to hold my bed. I will not get credit while I am incarcerated. Discussion will be held between TDRF, my CCO, and counselors to determine the best housing option for me. *

Initials

Drug and alcohol-free housing - Program of Recovery - Terms - Application of chapter governs the terms of this agreement.

Financial Involvement of Staff Policy: Anyone associated with the house or TDRF is prohibited from handling my finances. *

Initials

Please open a bank account as soon as possible. Cashier's checks, or money orders are accepted methods of payment. We do not accept cash, credit cards or personal checks.

TDRF will email you a payment receipt once payments are received and processed. When making payments, be sure to put the payment due date and your name in the notes section.

TDRF will provide you with a summary of your account ledger regarding payments, including any outstanding balances or charges within 48 hours of request.

Cashier's check or money orders must be mailed to the following address, and post marked no later than the due date to avoid late fees:

The Damascus Road Foundation
120 Lange Dr
Troy, MI. 48098

PROMISE TO PAY ACCOUNT

For and in consideration of services to be rendered, I promise to pay TDRF all charges rendered to me from admission to dismissal. I understand that the total of such charges is due and payable according to this FINANCIAL AGREEMENT.

*** I understand that I may carry no more than a two-week balance on my account. ***

First Name *

Last Name *

Signature *

×

Clear

Sign above

Staff Member First Name *

Staff Member Last Name *

Signature *

×

Clear

Sign above

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Submit