THE HOME OF BLESSINGS RESIDENTIAL AGREEMENT

I. THE PARTIES. This Residential Agreement ("Agreement") made://
Landlord: Landlords name: Landlords mailing address:
Tenant(s) name and last name:
If there is an responsible party, what is their name and last name:
Responsible party address: Landlord and Tenant are each referred to herein as a "Party" and, collectively, as the "Parties." NOW, THEREFORE, FOR AND IN CONSIDERATION of the mutual promises and agreements contained herein, the Tenant agrees to Rent a bedroom/bed space. Landlord promises to provide 3 meals a day.
Rent type/Appliances and Late Fees
II. Rent TYPE. This Agreement shall be considered a: (check both)
☐ - Fixed Rental . The Tenant shall be allowed to occupy the Premises starting on [Move in START DATE]/
☐ - Month-to-Month Rent. The Tenant(s) will give a 30 day notice before moving out.
The aforementioned bedroom/bed space shall be rented by the Tenant ("Premises")
VII. APPLIANCES. The Landlord shall: (check one)
☐ - Provide the following appliances: [three meals a day] snacks or special drinks are not included.
☐ - Not provide any appliances.
VIII. RENT. The Tenant shall pay the Landlord, each month, MONTHLY RENT: \$ The Rent shall be due on the [] of every month.
X. LATE FEE. If Rent is not paid on the Due Date:
There shall be a penalty of \$65.00 of the first day of late and \$15.00 due as Every Day Rent is Late. The payment will be late after 4 days of the due date.

Demographic / Financial Date of birth: Primary Care Physician: Social Security Number:_____ Medicare Number: Medicaid Number: Other insurance: Are you a veteran? Yes or No VA clinic & Physician & Number: Other insurance: Prepayment, Security Deposit, Parking, Utilities, and Early Termination **XII. PRE-PAYMENT**. The Tenant shall: (check one) ☐ - Pre-Pay Rent in the amount of \$[PRE-PAY RENT AMOUNT] for the term starting on [START DATE] and ending on [END DATE]. The Pre-Payment of Rent shall be due upon the execution of this Agreement. ☐ - Not be required to Pre-Pay Rent. XIV. SECURITY DEPOSIT. As part of this Agreement: (check one) ☐ - The Landlord requires a payment in the amount of \$[SECURITY DEPOSIT AMOUNT] ("Security Deposit") for the faithful performance of the Tenant under the terms and conditions of this Agreement. Payment of the Security Deposit is required by the Tenant upon the execution of this Agreement. The Security Deposit shall be returned to the Tenant within [#] days after the end of the Lease Term less any itemized deductions. This Security Deposit shall not be credited towards any Rent unless the Landlord gives their written consent. ☐ - The Landlord does not require a Security Deposit as part of this Agreement. XVI. PARKING. The Landlord: (check one)

\square - Shall provide [#] parking space(s) to the Tenant for a fee of \$[PARKING FEE] to be paid \square at the execution of this Agreement \square on a monthly basis in addition to the relative parking space(s) are described as: [DESCRIBE PARKING SPACES]	
☐ - Shall NOT provide parking.	
XVIII. UTILITIES . The Landlord shall provide the following utilities and services to the Tenan Electricity and water.	nt:
Any other utilities or services not mentioned will be the responsibility of the Tenant.	
XIX. EARLY TERMINATION. The Tenant: (check one)	
\Box - Shall have the right to terminate this Agreement at any time by providing at least days' written notice to the Landlord along with an early then there will be no refunds). During the notice period the tenant will have 30 days to move out	
\square - Shall not have the right to terminate this Agreement.	
Medications List	
Please list over the counter medications your currently taking and how much your tak	dina:
riease list over the counter medications your currently taking and now much your tak	ung.
nitials: I understand may request medical records from primary P0	CP.
speciality physicians, Hospitals, rehabs, or any other healthcare organization to verify ALL co	
nedications and will be required to sign a medical release form for that purpose.	
, Understand that I am required to give a written 30-day notice	e to
nove out	
Bedroom Hold Policy	
, Understand that if I admit to a hospital, rehab, or any other facili	ties

or programs, go out of town, etc. I must pay my rent within 5 days of my due date, to keep my room /

bed. It is my, (initials) responsibility to ensure my rent is paid and if is not paid, I (initials) understand my bed / room will no longer be available					
Activities of Daily Living / Medical Needs					
Cognition (Dementia or alert & oriented X3, etc.)					
Ambulation					
Transfer (can you move from your wheelchair?)	Yes or No				
Bathing / shower					
Toileting (list if incontinence with bowel or bladder)					
Devices currently using (wheelchair, Walker, etc.)					
Are you a smoker?	Yes or No				
Do you have oxygen and if so how many liters?					
Are you a diabetic? Insulin? (can you self manage?)					
Is she/he allergic to anything, if so what are she/he allergic to					
Smoking Policy, Agent/Manager, Abandonme	ent, Noise/waste, and etc.				
XX. SMOKING POLICY. Smoking on the Premi	ses is: (check one)				
☐ - Permitted ONLY in the following areas: Outside					
☐ - Prohibited on the Premises and Common Areas.					
XXIV. AGENT/MANAGER. (check one)					
\square - The Landlord does have a manager on the Premises.					
\square - The Landlord does not have a mana	ger on the premises				

XXVIII. ABANDONMENT. If the Tenant vacates or abandons the Premises for a time-period that is the minimum set by State law or seven (7) days, whichever is less, the Landlord shall have the right to terminate this Agreement immediately and remove all belongings including any personal property off of the Premises. If the Tenant vacates or abandons the Premises, the Landlord shall immediately have the right to terminate this Agreement.

XXXII. NOISE/WASTE. The Tenant agrees not to commit waste on the premises, maintain, or permit to be maintained, a nuisance thereon, or use, or permit the premises to be used, in an unlawful manner. The Tenant further agrees to abide by any and all local, county, and State noise ordinances.

XXXIII. GUESTS. Guests of the Tenant are allowed for periods not lasting for more than 7:30pm unless otherwise approved by the Landlord in writing.

XXXIV. COMPLIANCE WITH LAW. The Tenant agrees that during the term of the Agreement, to promptly comply with any present and future laws, ordinances, orders, rules, regulations, and requirements of the Federal, State, County, City, and Municipal government or any of their departments, bureaus, boards, commissions and officials thereof with respect to the premises, or the use or occupancy thereof, whether said compliance shall be ordered or directed to or against the Tenant, the Landlord, or both.

Pet Policy: (check one)
\square - If the tenant decides to have a pet, there will be a \$150 deposit fee (one time payment)
□- Will not have any pets

XLIII. HAZARDOUS MATERIALS. The Tenant agrees to not possess any type of personal property that could be considered a fire hazard such as a substance having flammable or explosive characteristics on the Premises. Items that are prohibited to be brought into the Premises, other than for everyday cooking or the need of an appliance, includes but is not limited to gas (compressed), gasoline, fuel, propane, kerosene, motor oil, fireworks, or any other related content in the form of a liquid, solid, or gas.

Indemnification and Policies

XLIV. INDEMNIFICATION. The Landlord shall not be liable for any damage or injury to the Tenant, or any other person, or to any property, occurring on the Premises, or any part thereof, or in common areas thereof, and the Tenant agrees to hold the Landlord harmless from any claims or damages unless caused solely by the Landlord's negligence. It is recommended that renter's insurance be purchased at the Tenant's expense.

XLVIII. GOVERNING LAW. This Agreement is to be governed under the laws located in the State where the Premises is located.

XLIX. ADDITIONAL TERMS AND CONDITIONS. You will have to follow our rules. With this contract you will be paying for a shared room.

Driving policy:

We would charge \$50 for the ride and \$20 for the whole car ride time.

L. ENTIRE AGREEMENT. This Agreement contains all the terms agreed to by the parties relating to its subject matter including any attachments or addendums. This Agreement replaces all previous discussions, understandings, and oral agreements. The Landlord and Tenant agree to the terms and conditions and shall be bound until they move out..

Don't Not Disturb Others!

There are no refunds no matter what the situation is. Remember this is not a group home, We are roommates. We are not 24 hr care.

Landlord's Signature	Date:	
Print Name:		
Tenant's Signature	Date:	
Print Name:		
If any, responsible party Signature Date:		-
Print Name:		

AMOUNT (\$) DUE AT SIGNING

Security Deposit: \$		
First (1st or) Month's Rent: \$		
Parking Fee: \$		
Pet Fee(s): \$		
Prepayment of Rent: \$		
Total Amount: \$		
Landlord's Signature	Date:	
Print Name:		
Tenant's Signature	Date:	
Print Name:		
If any, responsible party Signature Date:		
Print Name		