

**COUNTY OF MONTEREY, on behalf of
MONTEREY COUNTY BEHAVIORAL HEALTH BUREAU
HOPE HOUSING MARINA LEASE**

NAME OF RESIDENT: _____ DWELLING BED#: _____

ADDRESS: PUEBLO DEL MAR 17th REGIMENT COURT AND KWAJALEIN COURT, MARINA, CA 93933

The County of Monterey, on behalf of the Monterey County Behavioral Health Bureau, holds the Master Lease for the abovementioned property from Housing Authority of Monterey County (hereinafter referred to as "Owner"). The County of Monterey, on behalf of the Monterey County Behavioral Health Bureau (MCBHB) (hereinafter referred to as "Landlord"), does hereby lease to _____ (hereinafter referred to as "Resident") the dwelling (hereinafter referred to as "Premises") described under the terms and conditions listed below.

1. **TERM OF LEASE:** This lease shall be for a period of twelve (12) calendar months.
2. **RENEWAL OF LEASE:** At the end of the initial term, this lease shall be automatically renewed for successive terms of one calendar month each but will not exceed twenty-four (24) months from the date of initial occupancy, unless terminated by either party as stated below. A minimum of three (3) months additional occupancy may be extended to the Resident if the Resident has secured a move-in date to subsequent housing.
3. **MEMBERS OF HOUSEHOLD:** For individual Residents sharing a unit, they will reside with one other Resident. Resident's household includes any animal approved to reside in the unit. Maximum occupancy for families will not exceed four (4) family members total per unit. "Household" members include Resident, resident's family members listed below, and any animal approved prior to lease signing. Occupants under this lease are limited to the Resident(s) and following members below:

Name	Relationship	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. **RENTAL PAYMENTS:**
Resident agrees to pay \$ _____ rent per month payable in advance on the first day of the calendar month beginning _____, 20____. The monthly rent shall remain in effect unless adjusted as stated below in paragraph nine (9). The initial prorated rent for the period beginning _____, 20__ and ending _____, 20__ shall be due and payable at the time this lease is executed. Rent is calculated as 30% of the household/family income.

Rent Checks and Money Orders will be made out to "Monterey County Behavioral Health Bureau". Rent is due on the first of each month and is delinquent on the tenth. The cost of service of any 3-Day Notice for late payment of rent shall be charged to the Resident's account and payable immediately.

5. **SECURITY DEPOSIT:** Hope Housing will not collect a security deposit from Resident. Security and pet/assistance animal deposits will be paid by MCBHB and upon Resident move-out, the unused portion of the deposit will be reimbursed back to MCBHB and will be set-aside to fund future Resident security deposits.

6. **UTILITIES SERVICES AND EQUIPMENT FURNISHED BY LANDLORD:**
Owner and Hope Housing representatives shall furnish the following checked utilities, services and equipment and included in the monthly rent:
 Gas Electricity Water Sewer Garbage Collection
 Refrigerator Electric Range Gas Range Heat Coin Laundry
 Furniture Other (specify) _____

Residents shall have the following utilities connected at all times during their tenancy:
 Gas Electricity Water Sewer Garbage Collection

Refrigerator Electric Range Gas Range Heat Laundry
 Furniture Other (specify) _____

- a. Cooking privileges are limited to the common kitchen area. Portable stoves and heaters are prohibited in the bedrooms.
- b. Landlord will not be responsible for failure to furnish utilities by reason of any cause beyond its control.
- c. All units are furnished. Resident is prohibited from removing said furnishings and must coordinate adding personal furniture with Hope Housing staff.

7. **MAINTENANCE AND REPAIR CHARGES:** Residents shall pay for all maintenance and repair charges including cleaning and fumigation rendered necessary by the acts or neglect of Resident. Charges assessed shall become due and payable to the Landlord on the first of the month following the month they are incurred or as outlined in payment plan.

8. **ANNUAL REDETERMINATION OF RENT- DWELLING SIZE AND ELIGIBILITY:**

- a. At least once every twelve (12) months, Resident agrees to furnish accurate and conclusive information as requested by Landlord about income, employment, and members of the family for use by Landlord in determining whether the rental amount should be changed, whether the size of the premises is still appropriate for Resident's needs and whether Resident is still eligible for the housing. This determination shall be made in accordance with the provisions set forth in Landlord's Statement of Policies governing leasing and occupancy.
- b. Any change in rent required as a result of this redetermination shall be made effective the first of the month following the date of the reexamination.
- c. When a reexamination is completed, Landlord and Resident will, if necessary, execute an Amendment to Lease.
- d. Resident's rental application and personal declaration(s), copies of which are attached hereto are hereby incorporated in and made a part of this lease agreement. Any material misrepresentation or omission made by Resident in the application or personal declaration will constitute a material breach of this lease agreement.

9. **REPORTING INTERIM CHANGES IN INCOME AND FAMILY COMPOSITION:**

- a. The Resident agrees to report the following changes in family composition or income within ten (10) days of the change:
 - i. There is a loss of lessee through death, divorce or other continuing circumstances, or addition of a family member who, by marriage, remarriage or otherwise, shall become lessee in accordance with Landlord Policy.
 - ii. Any increase or decrease in family income.
 - iii. Commencement or discontinuance of General Assistance (GA), Temporary Assistance for Needy Families (TANF), or Supplemental Security Income (SSI).
- b. If these reported changes result in a decrease in the Resident's rent, the reduced rental rate shall become effective the first day of the month following that in which the change was reported. Resident agrees to accept the rental reduction as an Amendment to the Lease. Any overage charges will be credited to the Resident's account.
- c. If the reported changes result in an increase in the Resident's rent, the higher rental shall take effect the first day of the second month following that in which the change occurred. Resident agrees to accept the rental increase as an Amendment to the Lease.

10. **RETROACTIVE RENT CHARGES:** If the Resident has failed to report changes in family circumstances as required in Paragraph 9, or misrepresented to Landlord the facts upon which rent is determined, and his misrepresentation or failure to report facts results in the Resident paying less rent than Resident should have been charged, Landlord shall adjust the rent to the proper amount.

- a. The increase in rent shall be made retroactive to the first day of the second month after the change in family circumstances occurred.
- b. The new, increased rental rate and all retroactive rent shall be due and payable on the first day of the month following receipt of the Amendment to the lease.

11. **REQUIRED TRANSFER:** If Landlord determines that the size of the premises is no longer appropriate to Resident's needs, Landlord may amend this lease by notifying the Resident, in accordance with the Paragraph 19, that Resident will be required to move to another unit of appropriate size or type within the community in which the Resident lives, giving Resident reasonable time in which to move. If Hope Housing staff determines that transferring Resident to another unit is in the best interest of the Resident or milieu, or for Landlord to respond to a reasonable accommodation request in accordance with Paragraph 26, Landlord reserves the right to transfer the leased bed to a more safe or compatible dwelling.

12. **OCCUPANCY OF THE DWELLING:** Resident agrees not to assign this lease, nor to sublet or transfer possession of the premises, nor to give overnight accommodations to boarders, visitors, or lodgers. Resident further agrees not to

use or permit the use of the Premises for any purpose other than as a private dwelling solely for the Resident and members of Resident's household as set forth in Paragraph 3 above. Any additions to the household members on the lease, including Live-in Aides, but excluding natural births, require the advance written approval of the Landlord. Such approval will be granted only if the new family members pass the Landlord's screening criteria and a unit of appropriate size is available. Resident agrees to wait for the Landlord's approval before allowing additional persons or assistance animals to move into the Premises. Failure on the part of the Resident to comply with this provision is a serious violation of the material terms of the lease, for which the Landlord may terminate the lease in accordance with Paragraph 20.

13. **RULES:** Resident shall comply with Hope Housing Program Agreements; Hope Housing staff has provided a copy of the Hope Housing Agreement to Resident. Any amendment to the rules shall be in writing and effective 30 days after the notice thereof to you as set forth in Paragraph 30. Resident shall not cause or permit on the Premises or in the common areas excessive noise or activity that disturbs the peace and quiet of other residents or neighbors. Resident shall not cause or permit any other activity constituting a nuisance on or about the Premises of which adversely affects the health or safety of any person, nor shall Resident interfere with the management of the Premises. Resident agrees to act in a cooperative manner with neighbors, Hope Housing staff and Owner's and Landlord's Representatives. By initialing as provided, Resident acknowledges receipt of a copy of such rules, a copy of which is attached to, and made a part of this lease. Resident further agrees to comply with all rules as set forward in the bridge housing program.
14. **RESIDENT OBLIGATIONS:** The Resident Shall:
- a. Comply with all obligations imposed upon residents by applicable provisions of state and local building and housing codes materially affecting health and safety;
 - b. Report immediately to the appropriate federal, state or local governmental agency any case of infectious or contagious disease occurring in the family or among any persons living or staying in the dwelling unit;
 - c. Keep the Premises and such other areas as may be assigned to Resident for Resident's exclusive use in a clean and safe condition including outdoor areas;
 - d. Dispose of all ashes, garbage, rubbish, animal waste, and other waste from the Premises in a sanitary and safe manner;
 - e. To use only in a reasonable manner all electrical, plumbing, sanitary, heating, ventilating, air conditioning and other utilities;
 - f. Promptly notify Hope Housing Staff of the need for repairs to the Premises and known unsafe conditions in the common areas and grounds of the complex that may lead to damage or injury;
 - g. Refrain from and cause Resident's household and guest to refrain from destroying, defacing, damaging or removing any part of the Premises or complex;
 - h. Pay for the repair of all damages, except for normal wear and tear, to the Premises, complex buildings, facilities or common areas according to Paragraph seven (7) which were intentionally or negligently caused by Resident, members of the household or guests;
 - i. Conduct self and cause other persons and who are on the Premises with Resident's consent to conduct themselves in a manner which will not disturb his/her neighbor's peaceful enjoyment of their premises and will encourage the maintaining of the complex in a decent, safe and sanitary condition;
 - j. Refrain from illegal or other activities such as excessive traffic, parties, etc. which impair the physical or social environment of the community;
 - k. Agree that premises are not to be used for any illegal purposes, not to display on or about the Premises any signs without the prior written approval of Landlord or Landlord Representative, not to make any repairs or alterations or install any equipment without the written consent of Landlord or Hope Housing Staff, nor to use the Premises for business purposes without written consent of Landlord or Hope Housing staff;
 - l. Not use or store alcohol or substances/drugs on the Premises, to include in vehicles on the Premises;
 - m. Pets and assistance animals must have prior approval to live on premises. Assistance animal is defined as 1) service animal and 2) any trained or untrained animal that performs specific tasks or assistance and/or provide therapeutic emotional support for an individual with a disability.
 - n. Not place or allow to be placed a waterbed in the Premises;
 - o. Abide by the Program Rules and Expectations as incorporated herein and referred to in Paragraph 13;
 - p. Assure that Resident, any member of the household, guests or any other person under the Resident's control shall not engage in any Criminal Activity that threatens the health, safety or right to peaceful enjoyment of the Premises by other residents or employees or agents of the Landlord;
 - q. Assure that Resident, any member of the household, guests or any other person under the Resident's control shall not engage in any Criminal Activity on or off the Premises. Drug related criminal activity includes the illegal manufacture, sale, distribution, use or possession with intent to sell, manufacture, sell, or distribute or use of a "controlled substance" as defined in section 102 of the Controlled Substance Act (21 USC § 802);
 - r. Refrain from violence, threatening behavior, or disturbing the peaceful enjoyment of the Premises of the other Residents;
 - s. Obey all traffic signs within the housing complex and to park only in assigned or designated parking spaces. Resident agrees to remove from Landlord's property any vehicles without valid registration stickers. Any

- inoperable or unregistered vehicle will be removed from the premises at Resident's expense. Resident agrees not to repair vehicles on the project site;
- t. Maintain the grounds and landscaping adjacent to Resident's premises and keep free from waste, debris, and unsanitary conditions. In the event Resident fails or neglects to maintain the grounds as assigned, Resident shall pay to Landlord any and all expenses incurred by Landlord in the maintenance or repair of said grounds rendered necessary by such failure or neglect on the part of the Resident;
 - u. Give prompt notice to Landlord of Resident's leaving the dwelling unit unoccupied for any period exceeding one calendar week;
 - v. Act in a cooperative manner with neighbors, Hope Housing Staff, and the employees or agents of the Owner or Landlord. Resident agrees to refrain from acting or speaking in an abusive or threatening manner toward housemates, neighbors and the employees or agents of the Landlord. Resident agrees to actively intervene if members of Resident's household or guests act or speak in an abusive or threatening manner toward housemates, neighbors and the employees or agents of the Landlord;
 - w. Do not display, use, or possess or allow members of Resident's household or guests to display, use or possess any firearms, (operable or inoperable) or other offensive weapons as defined by laws and courts of the State of California anywhere in the unit or on the property of the Landlord;
 - x. Take reasonable precautions to prevent fires and to refrain from storing or keeping flammable materials upon the premises;
 - y. Not smoke or use wick candles inside any dwelling units in the complex.
 - z. Not commit any fraud in connection with any Federal housing assistance program and not to receive assistance for occupancy of any other unit under any Federal housing assistance program during the term of this Lease;
 - aa. Participate in the Hope Housing program and abide by its Rules;
 - bb. Assigned responsibilities (if none, so state): _____
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15. **HOPE HOUSING RESPONSIBILITIES:** Owner, Landlord, or Hope Housing Staff will:

- a. Maintain the Premises and complex in a decent, safe and sanitary condition;
- b. Comply with the requirements of applicable state and local building codes, any housing codes and regulations materially affecting health and safety;
- c. Make necessary repairs to the Premises, at its own expense, except as otherwise provided in this Lease;
- d. Keep complex buildings, facilities, and common areas not otherwise assigned to the Resident for maintenance and upkeep, in a clean and safe condition;
- e. Maintain in good and safe working order and condition: electrical, plumbing, sanitary, heating, ventilating and other facilities and appliances supplied or required to be supplied by Owner;
- f. Provide and maintain receptacles and facilities (except containers for the exclusive use of an individual Resident) for the deposit of ashes, garbage, rubbish, and other waste removed from the Premises by the Resident;
- g. Supply running water and reasonable amounts of hot water and heat at appropriate times of the year, except when heat or hot water are generated by an appliance within the exclusive control of the Resident and supplied by a direct utility connection.

16. **DEFECTS HAZARDOUS TO LIFE, HEALTH, OR SAFETY:** In the event the Premises are damaged to the extent that conditions are created which are hazardous to life, health, or safety, of the occupants, the resident must immediately notify the employees or agents of the Landlord of damage and:

- a. Employees or agents of the Landlord shall make repairs within a reasonable time, but the cost of said repairs shall be charged to the Resident if the damage was caused by Resident, Resident's Household, or Resident's guests;
- b. In circumstances where necessary repairs cannot be made within a reasonable time, Landlord shall offer, if available, standard alternative accommodations subject to conditions in Paragraph 19;
- c. In the event repairs are not made in accordance with (a) above, or alternative accommodations are not provided in accordance with (b) above, abatement of rent shall occur in proportion to the seriousness of the damage and loss in value as a dwelling. No abatement of rent shall occur if the Resident rejects alternative accommodations if the damage was caused by the Resident, Resident's household, or guests.

17. **PREOCCUPANCY AND TERMINATION INSPECTIONS:** When Resident moves in, Landlord Representative/Hope Housing Staff and Resident or his representative shall jointly inspect the Premises and Landlord shall give Resident a written inventory of the condition of the Premises and the equipment therein. This inventory form shall be signed by Landlord Representative/Hope Housing Staff and Resident. When Resident moves out, Landlord Representative/Hope Housing Staff (jointly with Resident and/or representative, if possible) will inspect the premises and give Resident a written statement of the charges for damage, if any, for which Resident is responsible. In addition, periodic inspections conducted jointly by Hope Housing Staff and Resident are a requirement of continued tenancy.

Failure to permit Hope Housing Staff to conduct such inspections, after proper notice is given to Resident, as set forth in Paragraph 18, is a violation of this lease.

18. **ENTRY OF PREMISES DURING TENANCY:** Resident agrees that the duly authorized agent, employee, or representative may enter the Premises as following:
- a. Hope Housing Staff or agents of the Owner shall, upon reasonable advance notification to Resident, be permitted to enter the Premises during reasonable hours for the purpose of performing routine inspections and maintenance or for making improvement or repairs. A written statement specifying the purpose of Landlord entry, delivered to the Premises twenty-four (24) hours before such entry, shall be considered reasonable advance notification. However, Landlord Representative/Hope Housing Staff shall have the right to enter Resident's Premises without prior notice to Resident if Landlord Representative/Hope Housing Staff reasonably believes that an emergency exists which requires such entrance.
 - b. If Resident or housemate requests a home call for any purpose, Owner Representatives or Landlord Representative/Hope Housing Staff may enter without written notification being sent to Resident and will attempt to call unit occupants prior to entry.
 - c. In the event that Resident is absent from the Premises at the time of entry, Owner Representatives or Landlord Representative/Hope Housing Staff shall leave a written statement specifying date, time, and purpose of entry.
 - d. Owner Representatives or Landlord Representative/Hope Housing Staff shall have the right to enter Resident's unit if staff has reason to believe that Resident's health or safety may be in jeopardy. If Hope Housing Staff has reason to believe Resident may have alcohol or drugs on the premises, Landlord may inspect Resident's unit in Resident's presence without giving advance notification of the inspection.
19. **NOTICE OF PROCEDURES:** Any notice to Resident shall be in writing and delivered to Resident or sent by first-class mail, properly addressed. Notice to Landlord shall be in writing and delivered to the Hope Housing office located at the Nancy Dodd Community Center, 3043 MacArthur Drive, Marina, CA 93933.
20. **TERMINATION OF LEASE:**
- a. This lease may be terminated by Resident at any time by giving thirty (30) days written notice. Resident agrees to move promptly and leave the unit in a clean and good condition (except for reasonable wear and tear), and to return the keys to Hope Housing employees or agents of the Landlord when Resident vacates. Rent will continue until the keys are returned to Landlord Representative's office.
 - b. This lease may be terminated by Landlord for completion of the tenancy period for the bridge housing program by Resident, or for serious or repeated violations of material terms of the lease, such as failure to make payments due under the lease or to fulfill Resident Obligations set forth in Paragraph 14 above or for other good cause. Such serious OR repeated violation of terms shall include but not be limited to:
 1. The failure to pay rent or other payments when due;
 2. Repeated late payments, which shall be defined as failure to pay the amount of rent or other charges due by the first of the month. Three such late payments within a twelve (12) month period shall constitute a repeated late payment;
 3. Misrepresentation of family income, assets or composition;
 4. Failure to supply, in a timely fashion, any certification, release, information, or documentation of family income or composition needed to process annual reexaminations or interim redeterminations;
 5. Serious or repeated damage caused by Resident's animal, or animal's behaviors that interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents;
 6. Neglect of animal in Resident's care that results in physical hazards or interferes with the health or safety of the animal or other residents;
 7. Alcohol or drug use that the Landlord determines interferes with the health, safety, or right to peaceful enjoyment of the premises by other residents;
 8. Serious or repeated damage to the dwelling unit, creation of physical hazards in the unit, common areas, grounds, or parking areas of any project site;
 9. Criminal activity by the Resident, household member, guest or other person under Residents control, including criminal activity that threatens the health, safety or right to peaceful enjoyment of the Premises by other residents or employees, or any drug-related criminal activity on or off the Premises;
 10. Weapons or illegal drugs seized by a law enforcement officer on the Premises;
 11. Any fire on Premises caused by Resident, household members or guest's actions or neglect.
 - c. Landlord shall give Resident written notice of termination of the lease if:
 1. Three (3) days in the case of failure to pay rent;
 2. Three (3) days, commensurate with the exigencies of the situation in the case of creation or maintenance of a threat to the health or safety of other Residents or Landlord or Owner Representatives, or Hope Housing Staff as a result of violations listed under 20(b) 7, 8, 9, and 10 above.
 3. A reasonable time, but not to exceed thirty (30) days, commensurate with the exigencies of the

situation in the case of creation or maintenance of a threat to the health or safety of other Residents or Landlord or Owner Representatives, or Hope Housing Staff; and

4. Thirty (30) days in all other cases.
 - d. Notices of Termination to the Resident shall be in writing, shall state the reason or reasons for the termination, shall inform the Resident of Resident's right to make a reply and of Resident's right to examine Landlord's documents directly relevant to the termination or eviction.
 - e. The failure of Landlord to insist, in any one or more instances, upon strict performance of any of the covenants or agreement of this lease or to exercise any option contained, shall not be considered as a future waiver or relinquishment of said covenants, agreements or options, but the same shall continue and remain in full force and effect. The receipt by Landlord of rent with the knowledge of the breach of any covenant or condition hereof shall not be deemed a waiver of such breach, and no waiver by Landlord of any of the provisions hereof shall be deemed to have unless expressed in writing and signed by Landlord, its representatives, or agents.
 - f. In the event the Premises occupied by the Resident under this lease be destroyed by fire or any other means caused by Resident or Resident's guests, this lease shall automatically terminate.
21. **ABANDONMENT OF PROPERTY:** In the event Resident is absent from the dwelling unit for twenty-one (21) consecutive days while in default of rent, Resident shall, at the option of the Landlord or Landlord Representative, be deemed to have abandoned the dwelling unit and any remaining personal property of Resident their own cost in litigation shall be considered abandoned and may be disposed of by Landlord or Hope Housing Staff according to state law.
 22. **ATTORNEY'S FEES:** In the event of a lawsuit to enforce any provision of this lease, each party shall bear its own cost in litigation.
 23. **GRIEVANCE PROCEDURE:** All grievances and appeals arising under this Lease shall be processed and resolved according to the grievance procedure of Landlord and Hope Housing Policies and Procedures that is in effect at the time grievance arises. This procedure is available in the Hope Housing office and incorporated herein by reference. The grievance procedure is applicable to all matters concerned by this lease including miscellaneous charges for repairs and lease violations. The grievance procedure does not pertain to unlawful detainer actions or terminations of tenancy.
 24. **ABSENCE FROM OCCUPANCY:** Resident agrees that if he/she does not personally reside in the Premises for a period of sixty (60) days for reasons other than poor health, serious illness, or an emergency, then Landlord may evict Tenant for good cause by issuing a 30-Day Termination Notice, for a total of 90-days before eviction.
 25. **HOLD HARMLESS AND WAIVER:** Landlord does not provide insurance for Resident's personal property. Resident agrees to indemnify and hold Landlord harmless and in no way accountable for any liability for personal injury or property damage caused or permitted by Resident or any other person on the Premises with Resident's consent except as may be caused by employees or agents of the Owner's or Landlord's negligence.
 26. **ACCOMMODATIONS OF PERSONS WITH DISABILITIES:** Landlord shall provide to Resident reasonable accommodations to the extent necessary to provide the disabled Resident with an opportunity to use and occupy the dwelling unit equal to a non-disabled Resident. Requests for accommodation must be in writing and delivered to Landlord in accordance with Paragraph 19. Should a non-disabled Resident occupy an accessible unit and a disabled Resident or applicant requires the features available in the accessible unit, when a non-accessible unit becomes available, the non-disabled Resident must transfer at their expense to that unit.
 27. **JOINT RESPONSIBILITY:** Resident acknowledges that this lease is between Owner, Landlord, Landlord agent, and each person executing this lease jointly and individually. In the event of default by one, each and every remaining person who executed the lease shall be responsible for payment of the total rent stated in Paragraph 4 or amended by Paragraphs 8, 9, or 10, and all other provisions of this lease.
 28. **NOTICE:** The California Department of Justice, Sherriff's Departments, Police Departments serving jurisdictions of 200,000 or more and many other local law enforcement authorities maintain for public access a database of the locations of persons required to register pursuant to paragraph (1) of subdivision (a) of Section 290.4 of the Penal Code. The database is updated on a quarterly basis and a source of information about the presence of these individuals in any neighborhood. The Department of Justice also maintains a Sex Offender Identification Line through which inquiries about individuals may be made. This is a "900" telephone service. Caller must have specific information about individuals they are checking. Information regarding neighborhoods is not available through the "900" telephone service.

It is the Resident's responsibility to inquire at the Sheriff's Department as to the presence of a sex offender in the neighborhood or complex in which they reside. It is not the Landlord's responsibility or obligation to inform each Resident of a sex offender's presence, whether or not the Landlord has knowledge or not of sex offender's presence in the complex or surrounding neighborhood.

29. **SMOKE DETECTOR POLICY:** The Landlord is required by law to have operational smoke detection in all of its units. Each sleeping room and each level of the unit must have a working smoke detector. Willfully disabling, including removal of any batteries or disconnection, or completely removing, the smoke detector is grounds for a lease violation and possible termination of the lease. Further, the Tenant will be charged a minimum of \$25.00 for reinstallation of each smoke detector that has been willfully disabled or removed. This includes the replacement of batteries that have been intentionally removed in order to inactivate the smoke detector.
30. **CHANGES:** This lease, together with any future adjustments of rent or dwelling unit, is the entire agreement between Landlord and Resident. No changes herein shall be made except in writing, signed and dated by both parties except that the grievance procedure and Program Rules, all incorporated herein by reference, may be modified from time to time by Landlord. Landlord will give thirty (30) days written notice to each affected Resident setting forth the proposed modification, the reasons therefore and providing Resident with an opportunity to present written comments which shall be taken into consideration by Landlord prior to the proposed modification becoming effective. A copy of such notice shall be:
- a. Delivered directly or mailed to Resident; or
 - b. Posted in at least three (3) conspicuous places within each structure or building in which the affected dwelling units are located. as well as in a conspicuous place at the project office, if any, or if none, at Landlord's Central Office.

By initialing below Resident acknowledges receipt of a copy of the following and acknowledges that they are incorporated into this lease.

Information	Initials	Information	Initials
Program Agreement		Background Check Authorization	
Move-in inspection		Bed Bug Policy	
Grievance Procedure- Personal Rights		Animal Policy	
Grievance Procedure- Tenant Rights		HHM Personal Declaration	

RESIDENT(S) WHOSE SIGNATURE APPEARS IMMEDIATELY BELOW, HAS READ AND DOES UNDERSTAND AND HEREBY AGREES TO ABIDE BY THE PROVISIONS OF THE LEASE AGREEMENT. IN WITNESS WHEREOF, THE PARTIES HEREIN HAVE EXECUTED THIS LEASE AGREEMENT.

Resident Signature _____ Dated _____

County of Monterey, on behalf of the MONTEREY COUNTY BEHAVIORAL HEALTH BUREAU
Landlord

By _____

Title _____

Dated _____

HOPE HOUSING TENANCY APPEAL AND GRIEVANCE PROCEDURE

Tenant Rights

As a Hope Housing Resident, you have the right to file a grievance or appeal of a management decision regarding your tenancy on your own behalf. It is the policy of management that all residents' grievances be given complete and objective consideration. Since, on rare occasions, this may require reference of a problem to higher levels of authority, this procedure has been adopted to assure that opportunity for full "due process" is given to all residents.

This procedure applies to both applicants and residents of Hope Housing. All residents are encouraged to use it without concern that it will reflect on their status as a resident. Day-to-day contact and sincere communication between the manager and the residents is the most successful way to avoid misunderstandings and develop mutual respect. Should failings occur, the following steps shall be followed.

A. Disputed rent or other charges

1. If the grievance involves the amount of rent or other charges that management claims are due, you must pay the amount in dispute to management, unless management waives the requirement. You must continue to pay all rent and charges not in dispute as they become due.
2. If you fail to pay or deposit the funds as required, the hearing officer may determine that you have waived your right to a formal hearing. If the hearing officer decides that you have waived your right to a hearing you can still resolve your grievance in court.

B. Rights to a grievance hearing

If you are a resident at Hope Housing and you believe that management has acted or failed to act so that your rights, duties, welfare, or status were adversely affected, or you believe that management has not complied with the terms of the residential lease it entered into with you, then you are entitled to a hearing in accordance with this grievance and appeal procedure.

If you applied for Hope Housing and were rejected, you also have the right to request a hearing.

The grievance and appeal procedure does *not* apply if:

1. You have been given a notice to vacate for the following:
 - a. Any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises of other residents or employees of Hope Housing;
 - b. Any violent or drug-related criminal activity on or off such premises; and
 - c. Any criminal activity that resulted in felony conviction of a household member.
2. You are disputing whether the terms and conditions in the lease are valid or proper.

C. Requesting a Hearing

THE INFORMAL HEARING. The goal of the informal hearing is to settle the problem without the need for a formal hearing. If you have a complaint and request a hearing, you will have an

informal hearing with the individual designated by Hope Housing management to hear complaints. Once requested, the informal hearing must be held between you and management within five working days after your request. Furthermore, management is obliged to give you its decision on the matter in writing within five days of the hearing. If the decision is not in your favor or the problem is not settled, you are entitled to request a formal hearing. The written decision will also include the procedures you must follow if you want to appeal the decision in a formal hearing.

1. PRESENT YOUR REQUEST FOR AN INFORMAL HEARING ON TIME. You must personally present your grievance either orally or in writing to our office so that you and we may discuss your grievance informally. You must present your grievance within a reasonable time, not to exceed ten (10) working days after the reason for the grievance or dispute arose.
 - a. While you can present your grievance orally, it is better to state your grievance in writing. The grievance may be simply stated, but you must specify the particular ground(s) for the grievance and action or relief you seek.
 - b. We will prepare a written, dated, and signed summary of our discussion and answer to your grievance within a reasonable time, not to exceed fourteen (14) days. We will mail or deliver one copy to you and keep one in your file. Our answer shall specify:
 - i. The name of the hearing participant;
 - ii. The date of the hearing;
 - iii. The nature of and specific reasons for the proposed disposition of the complaint
 - iv. The procedure by which you may request a formal hearing if you are not satisfied with the proposed disposition.

THE FORMAL HEARING. If you are dissatisfied with management's decision at the informal hearing, you have a right to a formal hearing with the MCBH Quality Improvement Deputy Director or designee.

1. PRESENT YOUR REQUEST FOR A FORMAL HEARING ON TIME. If you want a formal hearing, you may submit a written request to us within ten (10) working days after receiving the decision from the informal hearing. If you miss this 10-workday deadline, the decision from the informal hearing will become final. This shall not, however, constitute a waiver of your right thereafter to contest the disposition of the grievance in an appropriate judicial proceeding.
2. As with the informal hearing, you must state the nature of your complaint or grievance, the reasons why you disagree with the decision resulting from the informal hearing and action or relief you seek.

DO NOT MISS THE HEARING. The hearing will be held no more than two weeks after management receives your request for a hearing. You will be given at least three (3) days' notice of the hearing date. If you or management's representative fail to appear without notice, the

hearing officer can declare either that the absent party has waived the right to a hearing or reschedule the hearing for a later date.

D. Procedures governing the hearing

The following procedures are intended to protect your right to a fair hearing:

1. You can bring as much evidence to the hearing as you think you need. However, the hearing officer will determine if it relates sufficiently to the hearing to be considered.
2. You can bring someone to represent you at the hearing, but you must also be present.
3. You and management can have witnesses to support your respective positions, with the right to cross-examine each other's witnesses.
4. You will be given the opportunity before the hearing to examine and copy at your expense all documents, records, and regulations that are relevant to the hearing.
5. The hearing will be private unless you choose to have a public hearing.
6. If you want transcripts of the hearing, transcripts will be provided at the requestor's expense.
7. At the hearing, you must present your side of the dispute and state what you want done. It will then be management's burden to justify its actions. If the hearing relates to an eviction or lease termination, management must also prove "good cause," as defined in the Hope Housing Lease. Good cause includes, but is not limited to, nonpayment of rent, noncompliance with the terms of the lease, subletting, failing to maintain eligibility under the Program and remaining on the Property after your tenancy is terminated.
8. Those present at the hearing must conduct themselves in an orderly fashion. Failure to do so is sufficient grounds for the hearing officer or panel to render an adverse decision to the unruly parties.
9. If you need an interpreter, an interpreter will be provided.
10. During the pendency of the informal and formal hearing process and until the delivery of the written decision to you, management will extend the time period imposed pursuant to a formal eviction procedure arising out of the issues in dispute, including any court filing date required of you.

E. Decision of the hearing officer

The hearing officer must send a written decision to all parties within two weeks of the request for the hearing. The decision will be based solely upon a preponderance of the evidence presented at the hearing and in conformance with applicable laws and/or regulations. Provided that the decision is consistent with the applicable laws and regulations, it will be binding on all the parties. A copy of the decision will be placed in your tenant file.

If the decision is in your favor, project management must promptly take all actions necessary to carry out the decision or refrain from any action prohibited by the decision. If the decision is not in your favor, you must promptly comply with the decision, terminate your tenancy and move, if required, or take your complaint to court.

F. Unresolved grievances or additional appeals

If the parties and hearing officer or panel are unable to resolve the grievance or any party wishes to make an additional appeal, either party may direct their complaint to the local responsible agency for review and recommendation.

G. Right to go to court

Participation in any of the procedures described above will not waive, or affect in any manner whatsoever, any rights you or management may have to any judicial proceedings that may thereafter be brought on the matter.

Resident signature

Date

I have received a copy of my Tenant Rights _____ (initial)

Hope Housing Staff signature

Date

PROCEDIMIENTO DE APELACIÓN Y RECLAMACIÓN DEL ARRENDAMIENTO DE HOPE HOUSING

Derechos del inquilino

Como residente de Hope Housing, usted tiene el derecho de presentar una queja o apelación de una decisión de gestión con respecto a su alquiler en su propio nombre. La política de la administración es que todas las quejas de los residentes sean consideradas de manera completa y objetiva. Dado que, en raras ocasiones, esto puede requerir la referencia de un problema a los niveles más altos de autoridad, este procedimiento ha sido adoptado para asegurar que la oportunidad para el pleno "debido proceso" se da a todos los residentes.

Este procedimiento se aplica tanto a los solicitantes como a los residentes de Hope Housing. Se anima a todos los residentes a utilizarlo sin preocuparse de que se refleje en su estatus como residente. El contacto diario y la comunicación sincera entre el gerente y los residentes es la forma más exitosa de evitar malentendidos y desarrollar el respeto mutuo. En caso de que se produzcan incumplimientos, se seguirán los siguientes pasos.

A. Disputas sobre el alquiler u otros gastos

1. Si la reclamación se refiere a la cantidad de alquiler o otros gastos que la administración afirma que son debidos, usted debe pagar la cantidad en disputa a la administración, a menos que la administración renuncie el requisito. Deberá seguir pagando todos los alquileres y gastos que no estén en disputa a medida que haya que pagarlos.
2. Si no paga o deposita los fondos como es debido, el consejero auditor puede determinar que ha renunciado a su derecho a una audiencia formal. Si el consejero auditor decide que usted ha renunciado a su derecho a una audiencia, aún puede resolver su queja ante los tribunales.

B. Derecho a una audiencia de reclamación

Si usted es un residente de Hope Housing y cree que la administración ha actuado o dejado de actuar de manera que sus derechos, deberes, bienestar o estado se vieron afectados negativamente, o cree que la administración no ha cumplido con los términos del contrato de arrendamiento residencial que acordó con usted, entonces usted tiene derecho a una audiencia conforme a este procedimiento de queja y apelación.

Si solicitó una vivienda de Hope Housing y fue rechazado, también tiene derecho a solicitar una audiencia.

El procedimiento de reclamación y recurso no se aplica si:

1. Ha recibido un aviso de desalojo por los siguientes motivos:
 - a. Cualquier actividad criminal que amenace la salud, la seguridad o el derecho al disfrute pacífico de las instalaciones de otros residentes o empleados de Hope Housing;
 - b. Cualquier actividad criminal violenta o relacionada con drogas dentro o fuera de dichas instalaciones; y

- c. Cualquier actividad criminal que dio lugar a la condena por delito grave de un miembro del hogar.
2. Usted está disputando si los términos y condiciones en el contrato de arrendamiento son válidos o apropiados.

C. Solicitar una audiencia

LA AUDIENCIA INFORMAL. El objetivo de la audiencia informal es resolver el problema sin necesidad de una audiencia formal. Si usted tiene una queja y solicita una audiencia, tendrá una audiencia informal con la persona designada por la administración de Hope Housing para escuchar las quejas. Una vez solicitada, la audiencia informal debe llevarse a cabo entre usted y la administración dentro de los cinco días hábiles siguientes a su solicitud. Además, la dirección está obligada a comunicarle por escrito su decisión sobre el asunto en los cinco días siguientes a la audiencia. Si la decisión no le es favorable o el problema no se resuelve, tiene derecho a solicitar una audiencia formal. La decisión por escrito también incluirá los procedimientos que debe seguir si desea recurrir la decisión en una audiencia formal.

1. PRESENTE A TIEMPO SU SOLICITUD DE AUDIENCIA INFORMAL. Debe presentar su queja personalmente, ya sea de manera oral o por escrito, en nuestra oficina para que usted y nosotros podamos discutir su queja de manera informal. Debe presentar su queja en un plazo razonable, que no exceda de diez (10) días laborables después de que haya surgido el motivo de la queja o disputa.
 - a. Aunque puede presentar su queja de manera oral, es mejor hacerlo por escrito. La queja puede ser simple, pero debe especificar los motivos concretos de la queja y la acción o medida que solicita.
 - b. Prepararemos un resumen escrito, fechado y firmado de nuestra conversación y responderemos a su reclamación en un plazo razonable, que no excederá de catorce (14) días. Le enviaremos por correo o le entregaremos una copia y guardaremos otra en su expediente. Nuestra respuesta deberá especificar:
 - i. El nombre del participante en la audiencia;
 - ii. La fecha de la audiencia;
 - iii. La naturaleza y los motivos específicos de la resolución propuesta a la reclamación
 - iv. El procedimiento mediante el cual puede solicitar una audiencia formal si no está satisfecho con la resolución propuesta.

LA AUDIENCIA FORMAL. Si usted no está satisfecho con la decisión de la administración en la audiencia informal, usted tiene derecho a una audiencia formal con el Subdirector de Mejora de Calidad del MCBH o su designado.

1. PRESENTE A TIEMPO SU SOLICITUD DE AUDIENCIA FORMAL. Si desea una audiencia formal, puede presentarnos una solicitud por escrito en un plazo de diez (10) días laborables tras recibir la decisión de la audiencia informal. Si no cumple este plazo de 10 días laborables, la decisión de la audiencia informal será definitiva. No obstante, esto no supondrá una renuncia a su derecho a impugnar la resolución de la queja en un procedimiento judicial adecuado.

2. Al igual que en la audiencia informal, deberá exponer la naturaleza de su queja o reclamación, las razones por las que no está de acuerdo con la decisión que resulte de la audiencia informal y la acción o medida que solicite.

NO FALTE A LA AUDIENCIA. La audiencia se celebrará como máximo dos semanas después de que la dirección reciba su solicitud de audiencia. Se le notificará la fecha de la audiencia con al menos tres (3) días de antelación. Si usted o el representante de la administración no se presentan sin previo aviso, el funcionario encargado de la audiencia podrá declarar que la parte ausente ha renunciado al derecho a una audiencia o volver a programar la audiencia para una fecha posterior.

D. Procedimientos que rigen la audiencia

Los siguientes procedimientos tienen como objetivo proteger su derecho a una audiencia justa:

1. Puede presentar en la audiencia todas las pruebas que considere necesarias. Sin embargo, el funcionario de la audiencia determinará si están suficientemente relacionadas como para ser consideradas.
2. Puede traer a alguien que le represente en la audiencia, pero usted también debe estar presente.
3. Usted y la administración pueden tener testigos para apoyar sus respectivas posiciones, con derecho a interrogar a los testigos de la otra parte.
4. Se le dará la oportunidad, antes de la audiencia, de examinar y copiar a su cargo todos los documentos, registros y reglamentos que sean relevantes para la audiencia.
5. La audiencia será privada, a menos que usted opte por una audiencia pública.
6. Si desea transcripciones de la audiencia, se le proporcionarán transcripciones a cargo del solicitante.
7. En la audiencia, deberá presentar su versión del conflicto y exponer lo que desea que se haga. A continuación, la administración deberá justificar sus acciones. Si la audiencia se trata de un desalojo o la cancelación del contrato de alquiler, la administración también debe probar la "buena causa", tal como se define en el contrato de alquiler de Hope Housing. La buena causa incluye, pero no se limita a, la falta de pago del alquiler, el incumplimiento de los términos del contrato de alquiler, subarrendamiento, no mantener la elegibilidad bajo el programa y permanecer en la propiedad después de que su alquiler haya terminado.
8. Los presentes en la audiencia deberán comportarse de forma correcta. El incumplimiento de este requisito es motivo suficiente para que el funcionario o el panel de la audiencia dicten una decisión desfavorable para las partes indisciplinadas.
9. Si necesita un intérprete, se le proporcionará un intérprete.
10. Durante el período de espera del proceso de audiencia informal y formal y hasta la entrega de la decisión por escrito a usted, la administración extenderá el período de tiempo impuesto conforme a un procedimiento formal de desalojo que surja de los asuntos en disputa, incluyendo cualquier fecha de presentación ante el tribunal que se le exija a usted.

E. Decisión del consejero de audiencia

El consejero de la audiencia deberá enviar una decisión por escrito a todas las partes en un plazo de dos semanas a partir de la solicitud de la audiencia. La decisión se basará únicamente en la evidencia presentada en la audiencia y de conformidad con las leyes y/o reglamentos aplicables. Siempre que la decisión sea conforme con las leyes y reglamentos aplicables, será vinculante para todas las partes. Se incluirá una copia de la decisión en su expediente de alquiler.

Si la decisión es a su favor, la administración del proyecto deberá adoptar sin demora todas las medidas necesarias para ejecutar la decisión o abstenerse de cualquier acción prohibida por la decisión. Si la decisión no le es favorable, deberá cumplirla sin demora, poner fin a su contrato de alquiler y mudarse, si es necesario, o llevar su queja a los tribunales.

F. Quejas no resueltas o reclamaciones adicionales

Si las partes y el consejero de la audiencia o el grupo de expertos no consiguen resolver la queja o alguna de las partes desea presentar una reclamación adicional, cualquiera de las partes puede presentar su queja a la agencia local responsable para que la revise y haga recomendaciones.

G. Derecho a acudir a los tribunales

La participación en cualquiera de los procedimientos descritos anteriormente no supondrá la renuncia, ni afectará en modo alguno, a los derechos que usted o la administración puedan tener en cualquier procedimiento judicial que pueda iniciarse posteriormente sobre este asunto.

Firma del residente

Fecha

He recibido una copia de mis derechos como arrendatario _____ (Iniciales)

Firma del empleado de Hope Housing

Fecha

Hope Housing Marina
Attachment 3: Bedbug Policy

This agreement is an addendum and part of the rental agreement dated _____ between Monterey County Behavioral Health Bureau, hereby known as Landlord/Agent and _____ hereby known as Resident(s) of Hope Housing Marina.

- Residents acknowledge that the Landlord/Agent has inspected the unit and is aware of no bedbug infestation.
- Residents claim that all furnishings and personal properties that will be moved into the premises are free of bedbugs.

_____ (Resident Initials) _____ (Resident Initials)

Resident(s) hereby agree to prevent and control possible infestation by adhering to the below list of responsibilities:

1. Check for hitch-hiking bedbugs. If you stay in a hotel or another home, inspect your clothing, luggage, shoes and personal belongings for signs of bedbugs before re-entering your apartment. Check backpacks, shoes and clothing after using public transportation or visiting theaters. After guest visits, inspect upholstered furniture for signs of bedbug infestation.
2. Resident shall report any problems immediately to Hope Housing Staff. Even a few bedbugs can rapidly multiply to create a major infestation that can spread to other units.
3. Resident shall cooperate with pest control efforts. If your unit or a neighbor's unit is infested, a pest management professional may be called in to eradicate the problem. Your unit must be properly prepared for treatment. Resident must comply with recommendations and requests from the pest control specialist prior to professional treatment.
4. Resident agrees to indemnify and hold the Landlord/Agent harmless from any actions, claims, losses, damages and expenses including but not limited to attorneys' fees that Landlord /Agent may incur as a result of the negligence of the Resident(s) or any guest occupying or using the premises.
5. It is acknowledged that the Landlord /Agent shall not be liable for any loss of personal property to the Resident, as a result of an infestation of bedbugs. Resident agrees to have personal property insurance to cover such losses.

By signing below, the undersigned Resident(s) agree and acknowledge having read and understood this addendum.

Resident

Date

Resident

Date

Hope Housing Marina

Attachment 2: Criminal Background Checks

Hope Housing provides safe and affordable behavioral health bridge housing and services to individuals and families, and as such the safety of our community, residents, and children is our priority. It is our policy to run criminal background checks to ensure Residents are eligible for Hope Housing Marina. The following agreement is to be acknowledged by each adult Resident residing in Hope Housing Marina.

By signing below, I authorize Hope Housing staff to use my personal information to run a criminal background check using an outside vendor to determine housing eligibility.

Printed Name (Resident 1)

Signature

Date

Printed Name (Resident 2 if applicable)

Signature

Date

By signing below, I acknowledge that if I misrepresent criminal background information or do not disclose criminal history that would disqualify me from the Hope Housing Program anytime during the intake and lease agreement process, I am in violation of the lease agreement and my tenancy will be terminated immediately. I agree to voluntarily leave the Premises within 3 days and if I refuse to leave a 3-day eviction process will occur.

Resident Signature (Resident 1)

Date

Signature (Resident 1)

Date

**Hope Housing Marina Personal Declaration
Information Required for Reporting Purposes Only**

Name of Head of Household: _____ Mobile Number: _____

Instructions:

This form will be used to certify the size and members of your household and to calculate your rent prior to move-in. This form will also be used for your annual recertification.

- Use the correct legal name for each member of your household as it appears on the social security card or other identification.
- All of the adult members of the household must sign below certifying the information pertaining to them.
- Please use “no” or “none” if it does not apply to you.

Definitions:

“Head of Household” or “Head” is the Hope Housing potential Resident.

PLEASE PRINT

I. HOUSEHOLD COMPOSITION: List all persons who will be living in your home, listing the head of household first.

Adults Full Legal Name (All household members 18 years or older)	Date of Birth	Relationship to the Head of Household	Social Security Number	Indicate if: Single (S), Married (M), Divorced(D), Widowed(W), Separated (SP)
1.		Head		
2.				

Children(s) Name As it appears on their Social Security Card (All household members under the age of 18)	Date of Birth	<u>Relationship</u> to the Head of Household <u>and</u> their <u>Social Security</u> <u>#</u>	Name of School	Absent Parent's Name and Address (If Unknown, so state)
1.				
2.				
3.				

II. TOTAL HOUSEHOLD INCOME: List all money earned or received by adults living in your household. If an adult has no income, use "0" as amount of income.

This includes money from wages, self-employment, child support contributions, Social Security, disability payment, Worker's Compensation, retirement benefits, TANF/CALWorks, Veterans benefits, rental property income, stock dividends, income from bank accounts, alimony, financial aid, and all other sources.

Household Member Name	Name of Employer	Total Weekly Wages	Public Assistance (GA, TANF, CAL-Works)	Monthly Child Support Received	Social Security Benefits	Weekly Unemployment Benefits	All Other Income (Pensions, Disability, SSI, etc.)
		\$	\$	\$	\$	\$	\$
		\$	\$	\$	\$	\$	\$

COMMENTS:

III. Bank Information:

Please attach last three (3) months of bank statements reflecting income and sources of income; include checking and savings accounts.

Head
Name of Bank: _____ Pages attached: _____

Partner
Name of Bank: _____ Pages attached: _____

IV. MEDICAL EXPENSES: (Attach extra pages as needed)

Do you have any out of pocket medical expenses which are not reimbursed by medical insurance? Yes No

If YES, please explain: _____

V. ADDITIONAL INFORMATION:

Have you or any other adult members ever used any name(s) or Social Security Number(s) other than the one you are currently using? Yes No

If YES, please explain: _____

Have you or any adult member of your household ever been arrested or convicted of a sexual crime? Yes No

If YES please explain: _____

What was the outcome of the case? _____

Have you or any member of your household ever been convicted of a violent crime? Yes No

If YES, please explain: _____

What was the outcome of the case? _____

Have you or any member of your household ever been convicted of arson? Yes No

If YES, please explain: _____

What was the outcome of the case? _____

VI. REASONABLE ACCOMMODATION

Does any member of your household require a housing accommodation due to a diagnosed disability? Yes No

If you answered "YES" please continue. List the name and the disability type in the chart below.

Name	Type of Disability (physical, behavioral or developmental)

If your household has a member with a physical disability, please describe accessibility needs (wheelchair, hearing or sight impaired).

Please explain: _____

Would any member of your household who is disabled benefit from being housed in an accessible unit?

Yes No

If yes, please specify type of unit _____

Do you currently require an assistance animal? Yes No If yes, please attach documentation. Who will be the animals authorized guardian if you are hospitalized, incarcerated, or otherwise unavailable to care for the animal? Please refer to Assistance Animal Policy.

Name: _____ Address: _____

Telephone: _____ Relationship: _____

VII. EMERGENCY CONTACTS (RELATIVE NOT IN THE IMMEDIATE HOUSEHOLD):

Name: _____ Address: _____

Telephone: _____ Relationship: _____

Name: _____ Address: _____

Telephone: _____ Relationship: _____

VIII. PREAUTHORIZED SERVICE ANIMAL OR PET:

Assistance Animal Service Animal Pet

Name: _____ Dog Cat Male Female

Spayed/Neutered Yes No Breed: _____ Age: ____ Color: _____

Vaccine Record attached Yes No Registration # _____

Animals must be vaccinated and registered within 10 days (see Pet and Assistance Animal Lease Attachment)

I do hereby swear and attest under penalty of perjury that all of the information above about me and my household is true and correct. I also understand that I am to report any changes in this information to Hope Housing staff within ten (10) days of changes to income or household size. I understand that inquiries may be made to verify information in this form, including criminal background checks and that the making of false statements, misrepresentations, or omissions is grounds for disqualification, termination, eviction, and / or prosecution under the full extent of applicable Federal or California law. **All adult household members (18 years and older) must sign and date below.**

Signature of Head of Household

Date

Signature of Partner

Date

Date

.....

THIS SECTION TO BE COMPLETED IF THIS FORM IS FILLED OUT BY A PERSON OTHER THAN AN ADULT MEMBER OF THE HOUSEHOLD.

Full name and address of the person completing this form for those who are not able to complete it for themselves:

Name: _____

Address: _____

City, State _____

Hope Housing Marina

A County of Monterey Behavioral Health Bridge Housing Program

Hope Housing is a partnership between Monterey County Behavioral Health, the Housing Authority of Monterey County, Sun Street Centers, and Interim, Inc.

Hope Housing is a bridge housing program that provides short- and mid-term residential housing for individuals and families funded by the Behavioral Health Bridge Housing (BHBH) start-up grant through the Department of Health Care Services. The goal of Hope Housing is to provide services and supports to help people experiencing homelessness who have been diagnosed with a serious mental illness and/or a substance use disorder to overcome barriers to accessing and maintaining long-term housing. Services offered include outpatient specialty mental health services, outpatient substance use treatment, and wrap-around housing support services.

Our Housing Program

- Housing for up to 24 months
- Shared furnished 2BR units for adults
- Furnished family units, up to 4 members
- Substance-free recovery community
- Daily on-site staff and security
- Community Center
- Rent is 30% of income
- Waived security deposit

Our Support Services

- Individualized Housing Plans
- Specialty Mental Health Services
- Substance Use treatment
- Housing Navigation Services
- Community-based recovery activities
- Linkage to other support services
- Support in gaining income source and benefits

Who is eligible?

You must be at least 18 years of age, reside in Monterey County, and:

- Experiencing homelessness or at-risk of homelessness, AND
- Have a serious mental illness diagnosis, OR
- Have a substance use disorder diagnosis, OR
- A Community Assistance, Recovery, and Empowerment (CARE) Program Participant

Hope Housing is not just a housing program, it is a community. Participants will engage with a care team to develop individualized plans that include wellness, recovery, financial, and housing goals. (Please turn over for Programs Agreements)

Hope Housing Program Agreements

I understand that as a resident of Hope Housing, I am also a participant in the Hope Housing Program and will actively engage in offered housing and support services. I agree to:

1. Follow the terms of the Monterey County Behavioral Health Lease Agreement and Hope Housing Program Agreements and Expectations.
2. Work towards establishing financial responsibility. I will provide proof of income within 30-days of move-in and actively work toward sustainable income within 90-days.
3. Participate in wraparound services tailored to an individualized housing plan (IHP)
4. Attend quarterly (every 3 months) Individual Housing Plan (IHP) meetings with Wraparound team.
5. Meet weekly with Case Manager and/or Wraparound team members to update and track goals.
6. Pursue the goals of the Hope Housing Individualized Plan, with the goal of moving out to permanent housing within 12-18 months.
7. Respect Hope Housing staff members that enter my unit.
8. Participate in Weekly Structured Time (WST) at least 10 hours per week,
9. Smoke/vape only in designated smoking and vaping areas and dispose of cigarette butts in the provided bins; units are smoke and vape free.
10. Encourage and support the recovery efforts of all community members, through role-modeling healthy coping and lifestyle choices and being an active member of the community.
11. Treat housemates, visitors, Hope Housing participants and families, with respect and courtesy, and work together to create a safe, productive, and sober community.
12. Maintain the health and safety of Hope Housing buildings and grounds by reporting safety issues to staff and to care for my unit as well as the Hope Housing common areas.
13. Cooperate with my housemates and neighbors, resolve conflict respectfully, and to seek staff support if/when we are unable to come to a fair resolution.
14. Be actively accountable for my guests and family members and to take responsibility for any problematic behaviors that may cause safety issues or damage to others or property.
15. Foster a safe and nurturing environment for children. Parents are solely accountable for their children's safety and supervision beyond the childcare center.
16. Register all prescription medications with staff to increase your safety during an emergency or crisis, and store all medications responsibly (e.g., safety caps and lockboxes).
17. Keep my belongings stored safely and will lock the front door when I am not present to ensure the security of my dwelling for myself and my family or housemate.
18. Respect quiet hours 10 PM – 8 AM seven days a week. During these hours, radios, TVs, and conversations should be kept at a reasonable level so as not to disturb others. Visitors must leave your dwelling prior to 10PM, including other community members.

Hope Housing Marina

*Un Programa de Vivienda Puente del Departamento de Salud Mental del Condado de Monterey
Hope Housing es una colaboración entre el Departamento de Salud Mental del Condado de Monterey, la
Autoridad de Vivienda del Condado de Monterey, Sun Street Centers, y Interim, Inc.*

Hope Housing es un programa de viviendas puente que proporciona viviendas residenciales a corto y medio plazo para individuos y familias, financiado por la subvención inicial del Programa de Viviendas Puente de Salud Mental (BHBH) a través del Departamento de Servicios de Salud. El objetivo de Hope Housing es proporcionar servicios y apoyos para ayudar a las personas sin hogar, que han sido diagnosticadas con una enfermedad mental grave y/o un trastorno por consumo de sustancias, a superar las barreras para acceder y mantener una vivienda a largo plazo. Los servicios ofrecidos incluyen servicios ambulatorios de salud mental especializados, tratamiento ambulatorio de uso de sustancias y servicios integrales de apoyo para la vivienda.

Nuestro Programa de Vivienda

- Vivienda por hasta 24 meses
- Unidades compartidas de 2 dormitorios amuebladas para adultos
- Unidades familiares amuebladas, hasta 4 miembros
- Comunidad de recuperación libre de sustancias
- Personal y seguridad en el sitio diariamente
- Centro Comunitario
- La renta es el 30% de los ingresos
- Depósito de seguridad exento

Nuestros Servicios de Apoyo

- Planes de Vivienda Individualizados
- Servicios de Salud Mental Especializados
- Tratamiento de Consumo de Sustancias
- Servicios de Navegación de Vivienda
- Actividades de recuperación basadas en la comunidad
- Vinculación con otros servicios de apoyo
- Apoyo para obtener ingresos y beneficios

¿Quién es elegible?

Deberá tener al menos 18 años, residir en el Condado de Monterey, y:

- Estar sin hogar o en riesgo de estarlo, Y
- Tener un diagnóstico de enfermedad mental grave, O
- Tener un diagnóstico de trastorno por consumo de sustancias, O
- Ser participante en el Programa de Asistencia Comunitaria, Recuperación y Empoderamiento (CARE)

Hope Housing no es solo un programa de vivienda, es una comunidad. Los participantes se involucrarán con un equipo de atención para desarrollar planes individualizados que incluyan objetivos de bienestar, recuperación, financieros y de vivienda. (Por favor, consulte la página siguiente para los Acuerdos del Programa)

Acuerdos del Programa Hope Housing

Entiendo que, como residente de Hope Housing, también soy participante del Programa Hope Housing y me comprometo a participar activamente en los servicios de vivienda y apoyo ofrecidos. Estoy de acuerdo en:

1. Cumplir con los términos del Contrato de Arrendamiento del Departamento de Salud Mental del Condado de Monterey y los Acuerdos y Expectativas del Programa Hope Housing.
2. Trabajar para establecer responsabilidad financiera. Proporcionaré prueba de ingresos dentro de los 30 días posteriores a mi mudanza y trabajaré activamente hacia un ingreso sostenible dentro de los 90 días.
3. Participar en los servicios integrales adaptados a un plan de vivienda individualizado (IHP).
4. Asistir a reuniones trimestrales (cada 3 meses) del Plan de Vivienda Individual (IHP) con el equipo de servicios integrales.
5. Reunirme semanalmente con el Gerente de Casos y/o miembros del equipo de servicios integrales para actualizar y seguir los objetivos.
6. Perseguir los objetivos del Plan Individualizado de Hope Housing, con el objetivo de mudarme a una vivienda permanente dentro de 12-18 meses.
7. Respetar a los miembros del personal de Hope Housing que entren en mi unidad.
8. Participar en el Tiempo Estructurado Semanal (WST) al menos 10 horas por semana.
9. Fumar/vapear solo en las áreas designadas para fumar y vapear y desechar las colillas de cigarrillos en los contenedores proporcionados; las unidades son libres de humo y vapeo.
10. Alentar y apoyar los esfuerzos de recuperación de todos los miembros de la comunidad, modelando comportamientos de afrontamiento saludables y opciones de estilo de vida, y siendo un miembro activo de la comunidad.
11. Tratar a los compañeros de vivienda, visitantes, participantes de Hope Housing y sus familias con respeto y cortesía, y trabajar juntos para crear una comunidad segura, productiva y sobria.
12. Mantener la salud y seguridad de los edificios y terrenos de Hope Housing informando problemas de seguridad al personal y cuidando mi unidad, así como las áreas comunes de Hope Housing.
13. Cooperar con mis compañeros de vivienda y vecinos, resolver conflictos respetuosamente y buscar apoyo del personal si/no somos capaces de llegar a una resolución justa.
14. Ser responsable activamente de mis invitados y miembros de la familia y asumir la responsabilidad de cualquier comportamiento problemático que pueda causar problemas de seguridad o daños a otros o a la propiedad.
15. Fomentar un entorno seguro y enriquecedor para los niños. Los padres son los únicos responsables de la seguridad y supervisión de sus hijos más allá del centro de cuidado infantil.
16. Registrar todos los medicamentos recetados con el personal para aumentar su seguridad durante una emergencia o crisis, y almacenar todos los medicamentos de manera responsable (por ejemplo, tapas de seguridad y cajas de seguridad).
17. Mantener mis pertenencias almacenadas de manera segura y cerrar la puerta principal cuando no esté presente para garantizar la seguridad de mi vivienda para mí y mi familia o compañero de vivienda.
18. Respetar las horas de silencio de 10 PM a 8 AM los siete días de la semana. Durante estas horas, radios, televisores y conversaciones deben mantenerse a un nivel razonable para no molestar a los demás. Los visitantes deben salir de su vivienda antes de las 10 PM, incluidos otros miembros de la comunidad.

Hope Housing Program Agreements

Attachment 1

I understand that as a resident of Hope Housing, I am also a participant in the Hope Housing Program and will actively engage in offered housing and support services.

I agree to:

1. Follow the terms of the Monterey County Behavioral Health Lease Agreement and Hope Housing Program Agreements and Expectations.
2. Work towards establishing financial responsibility. I will provide proof of income within 30-days of move-in and actively work toward sustainable income within 90-days.
3. Participate in wraparound services tailored to an individualized housing plan (IHP)
4. Attend quarterly (every 3 months) Individual Housing Plan (IHP) meetings with Wraparound team.
5. Meet weekly with Case Manager and/or Wraparound team members to update and track goals.
6. Pursue the goals of the Hope Housing Individualized Plan, with the goal of moving out to permanent housing within 12-18 months.
7. Respect Hope Housing staff members that enter my apartment unit.
8. To participate in Weekly Structured Time (WST) at least 10 hours per week, such as:
 - a. wellness and recovery activities,
 - b. mental health treatment,
 - c. substance use treatment and 12-step programs,
 - d. housing or job search,
 - e. community events, including workshops, community council, and house meetings,
 - f. volunteering, employment, job training, or school.
9. Smoke/vape only in designated smoking and vaping areas and dispose of cigarette butts in the provided bins; units are smoke and vape free.
10. Encourage and support the recovery efforts of all community members, through role-modeling healthy coping and lifestyle choices and being an active member of the community.
11. Treat housemates, visitors, Hope Housing participants and families, with respect and courtesy, and work together to create a safe, productive, and sober community.
12. To maintain the health and safety of Hope Housing buildings and grounds by reporting safety issues to staff and to care for my unit as well as the Hope Housing common areas.
13. To cooperate with my housemates and neighbors, resolve conflict respectfully, and to seek staff support if/when we are unable to come to a fair resolution.
14. To be actively accountable for my guests and family members and to take responsibility for any problematic behaviors that may cause safety issues or damage to others or property.

15. To foster a safe and nurturing environment for children. Parents are encouraged to actively participate in parenting education, engage in self-esteem-building activities, and promote peaceful interactions within the community. Parents are solely accountable for their children's safety and supervision beyond the childcare center, and overnight stays with other program participants are not permitted.
16. Register all prescription medications with staff to increase your safety during an emergency or crisis, and store all medications responsibly (e.g., safety caps and lockboxes).
17. I will keep my belongings stored safely and will lock the front door when I am not present to ensure the security of my dwelling for myself and my family or housemate.
18. To respect quiet hours 10 PM – 8 AM seven days a week. During these hours, radios, TVs, and conversations should be kept at a reasonable level so as not to disturb others. Visitors must leave your dwelling prior to 10PM, including other community members.

I understand my responsibilities as a participant and resident of Hope Housing. I agree to adhere to the expectations listed above, in addition to my obligations and responsibilities as a Resident and Head of Household outlined in the Hope Housing Lease Agreement.

Participant/Resident Name

Participant/Resident Signature

Date

I received a copy of the Hope Housing Agreements and Expectations _____(initial)

Hope Housing Staff Signature

Date