

We are trialing a “Remote Move-In” option, allowing clients to secure housing even on days when our staff is unavailable for a in-person, intake.

We understand that case managers often have limited information at the initial referral stage. To make the process more efficient for everyone, we’ve developed a **Pre-Screening** and **Intake Form** that captures the key details needed to determine appropriate placement with us.

During this trial period, we ask that referrals be submitted **only for clients** whose basic intake information can be reasonably gathered beforehand and sent with **initial** bed request.



Step 1.

Send photos of *completed* **Pre-Screening** and **Intake form** *initialed* by case manager, for client file.

Step 2.

Schedule house visit or Video Interview and give client **Urine Testing Policy** (Initialed and photo sent back), **What to Expect & House Rules sheets**.

Step 3. Schedule move in day. Bring completed forms. Meet with staff for move in.



Remote Move-In Instructions

1. Please ensure all forms are completed and signed before arriving with your client.
2. Staff will assist with the virtual check-in, including **pest control and clothing checks**, via the Ring camera at the entry door.
3. Once photos of the *signature pages* of **Urine Testing Policy, Licensee Contract, and Vital Mail Policy** are received, the client’s door code will be sent for entry.
4. Before leaving, the case manager should initial the Virtual Check-In Form and send a **photo for confirmation**.

Thanks for all you do!





Fast Pre-Screening

We welcome guests who are ready to build a safe and supportive home. To help protect everyone's peace and progress, we're unable to accept individuals with:

- **Criminally violent behavior or patterns of violence**
- **Sexual Offenses**
- **Crimes involving children**

Case Manager Confirmation:

I confirm that, to the best of my knowledge, this client meets Evergreen Living Spaces' safety and community standards.

Case Manager
Initial Here: _____



Please send snapshot
of this page with initial request



(Clearly)
Print First Name _____ Last Name: _____ Date of Birth: _____
Full Address: _____
Phone: _____ Intake Date: _____
Spouse / Partner Name # _____ Sober Date: _____

Pending Charges: ☐ Yes ☐ No Ever convicted of a crime: ☐ Yes ☐ No
If so, what? _____
Are you on Parole or Probation: ☐ Yes ☐ No
If so, Officer and Phone Number: _____
Are you employed: ☐ Yes ☐ No
If so, where? _____

Drug/ Alcohol History: Do you use tobacco: ☐ Yes ☐ No
Age of first use: _____
Do you have a history of trauma? ☐ Yes ☐ No
Mental Illness Diagnosis : _____
Current Medications: _____
Emergency contact Name /Relationship/Phone Number _____
Previous drug/ alcohol treatments: _____
Longest period sober: _____
History or drug/ alcohol use in family: _____

Case Manager
Full Name & # _____



Please send snapshot
of this page with initial request

***Please set up video call or house visit with client



EVER GREEN

— Living —

SOBER LIVING ENVIRONMENT

- *No Drugs or Alcohol
- *Testing weekly and randomly
- *No Credit Check
- *Credit building resources offered.
- *Low Deposit
- *Fully Furnished
- *No Lease (Month to Month)
- * Zoom Screening Appointments Available
- *Shared rooms starting @ \$985/bed (Rate varies by location)
- *Single Persons over 18 only please

Call: Reme

916-347-8649

Sacramento, CA

RemeMartinRN.BSN@gmail.com



**If your client decides to come to
Evergreen, please fill out the
following pages.**

House Rules

(Please read **everything**. You are accountable to all of it.)



Entry & Ongoing

- New guests have a **1 week BLACKOUT** period to acclimate you to the new space. Must stay on the property. (No visitors except case managers, social workers etc.) Unless approved by house manager.
- **No smoking in the house.**
- **No Prohibited Drug Use** (Urine testing will take place weekly and randomly)
- **No Alcohol**
- **Clean up all personal items, dishes and trash**
- **You must wash your own laundry at least 1x per week**
- **Must initial the completion of designated chores DAILY. (See Daily Chore Rotation)**
- **Quiet time/ Lights Out 10pm - 7am**
- **Maximum of 15 min per bathroom use. (Including showers)**
- **Keep all windows and doors locked unless in use.**

Things to note:



Trash cans must be put on the curb every **TUESDAY for Wed pickup** by the assigned chore holder.



Mail will be retrieved once a week.

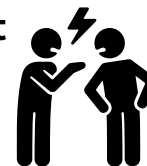
House Manager # _____



Good Neighbor Policy

- Keep noise low **at all times** — especially between 10 PM and 7 AM.
- No standing, hanging out, or smoking in the front of the property.
- Smoking and vaping **only** in the courtyard or backyard areas.
- Keep yards, and sidewalks clean and clutter-free.
- Park only in approved spots — never block driveways or sidewalks.
- Be polite and respectful if you see neighbors — a quick hello is fine, but keep conversations short and friendly.
- No loud music or groups gathering outside the home.
- Handle any neighbor complaints calmly — refer them to the house manager if needed.
- Always represent the home well — quiet, clean, and considerate

Conflict



Resolution

3 Steps:

- 1.) If there is an issue with a housemate contact the house manager about it first. I will address the whole house about the issue.
- 2.) I will address the person directly.
- 3.) The 3 of us will sit down and discuss the conflict.

If you are asked to leave, please gather belongings and leave the property within 20min.



House Rules

(Please read **everything**. You are accountable to all of it.)

To keep our home safe, respectful, and recovery-focused, we will use a point-based demerit system for house rules and chores. Infraction Points are cumulative (increases with each infraction).

3 points is seen as grounds for dismissal from the program.

At 2 points a Behavioral Notice will be sent to the Case Manager or designated representative. Staff discretion determines the point level, and positive behavior can reduce points over time.

| Points | Offense | Action / Consequence |
|----------|---|--|
| 1 point | Minor Offense Examples: poorly done chores, minor rule slip | Action: Verbal warning; staff discusses behavior and may document. |
| 2 points | Repeated or Significant Low-Level Violation Examples: repeated incomplete chores, smoking in non-designated area | Action: Written warning; copy sent to case manager or representative; meeting with staff to review expectations. |
| 3 points | Serious Offense Examples: aggression, theft, substance use | Action: Depending on offense, resident asked to leave immediately; authorities called if required; or message sent to case manager and parole officer to arrange new housing. |

Sample Behavior Notice

Resident: _____
Date: _____

This is to inform you that your client has reached 2 points on our behavioral demerit system.

At 3 points, the client may be asked to leave the program. One point will be removed every 30 days of consistent positive behavior.

Please refer to the attached demerit chart for full details.

House Manager: _____

• GOAL IS ACCOUNTABILITY, NOT PUNISHMENT — EACH POINT IS AN OPPORTUNITY TO CORRECT BEHAVIOR. • POINT REDUCTION: STAFF WILL REMOVE 1 POINT EVERY 30 DAYS OF CONSISTENT POSITIVE BEHAVIOR. • IMMEDIATE REMOVAL MAY OCCUR FOR SERIOUS SAFETY CONCERNS, REGARDLESS OF POINTS. REMINDER: THIS SYSTEM ENSURES SAFETY, FAIRNESS, AND SUPPORTS THE GROWTH OF ALL RESIDENTS.

Urine Testing Policy

Please read and have any questions explained before you sign

You are not required to stay with Evergreen Living Spaces but we want you know we keep a relaxed and supportive atmosphere around almost everything — **except our Good Neighbor Policy and Urine Testing.**

This isn't about punishment — but it's the only way to know your recovery is on track. And we take it seriously.

How it works:

- Testing will happen weekly and randomly (**meaning as often as we decide**).
- When it's time, just provide your sample — quick and simple — then get back to your day.
- Delays or extended time in providing a sample will be treated as a failed test.

We keep this process consistent and respectful for everyone's peace of mind and safety.



Client Initials_____



Please send snapshot
of this page **BEFORE MOVE IN**

Licensee Agreement

_____ I (licensee) understand that **THIS AGREEMENT IS NOT A LEASE.**

_____ I (licensee) understand that Evergreen Living Spaces provides furnishings, and controls all keys to the premises and individual rooms

_____ I understand that if I violate any rules of the licensee agreement, **I may be considered a criminal trespasser and subject to arrest under State Penal Code, "Criminal Trespass"**

_____ I understand that rooming homes and innkeepers have broad authority to lien all property contained within the rented room.

_____ I have read and understand the house rules provided to me (see addendum VIII)

_____ I understand that Evergreen Living Spaces is NOT an assisted living facility or a nursing home and that LANDLORD & PROPERTY MANAGER DOES NOT provide assistance with activities of daily living, medicine management, bathing, brushing, shaving, cutting food, toileting, transportation, supervision outside of the residence, incontinence care, dressing, movement or other daily activities. Outsourced 3rd parties may stop by and provide these services to the "licensee" if the "licensee" has a relationship with this outsourced 3rd party, however under no circumstances does Evergreen Living Spaces provide this service directly.

_____ I understand that any damages (other than normal wear) will be my financial responsibility.

_____ I understand that rooming home operator will have a lien for unpaid rent against all of Licensee's nonexempt personal property that is in the Property and may seize such nonexempt property if Licensee fails to pay rent. Property Code governs the rights and obligations of the parties regarding Landlord's lien. Landlord may collect a charge for packing, removing, or storing property seized in addition to any other amounts Landlord is entitled to receive. Landlord may sell or dispose of any seized property in accordance with the provisions of the Property Code.

_____ Any person who is a prevailing party in any legal proceeding brought under or related to the transaction described in this agreement is **entitled to recover a maximum of \$500 attorney's fees** from the non-prevailing party.

I. FEES

_____ The licensee, licensee's representative and/or licensee's legal representative agree that the Resident (or other specified party) will pay the basic rate as of the date of this agreement, which is \$_____ per month for shared room ; \$_____ per month for private room. An additional \$35 / month fee will be assessed for guests using mailbox services. See Addendum

_____ Payment is due the 1st - 4th of each month depending on the date that the licensee receives their income.

_____ In Lieu of deposit a NONREFUNDABLE risk fee of \$500 shall be assessed.

Total Move In \$ _____

II. PEST CONTROL AND INFESTATION

Bed bug addendum AND other infestation:

- A. This addendum addresses situations related to bed bugs and other infestations (roaches, gnats etc.) which may be discovered infesting the dwelling or personal property in the dwelling. You (licensee) understand that we relied on your representations to us in this addendum.

- B. INSPECTION. You agree that you:

Have inspected the dwelling prior to move-in and that you did not observe any evidence of bed bugs, roaches or other infestation

- C. INFESTATIONS. Prior to move-in, Licensee is certifying that they have examined the property for bed bugs, rodents and other bug infestations and did not observe any evidence of bed bugs or bed bug infestation or any other infestations including roaches, gnats etc. Therefore, in signing this addendum, Licensee certifies that if bed bugs or other bug infestations are later found in this unit, they will be deemed to have been introduced by the Licensee or one of the Licensee's guests and that the **LICENSEE WILL BE RESPONSIBLE FOR THE PEST TREATMENT**, including all reasonable costs of cleaning and pest control treatments. If we must move other residents in order to treat adjoining or neighboring dwellings to your dwelling unit, you will be liable for payment of any lost rental income and other expenses incurred by us to relocate the residents. If you fail to pay us for any costs you are liable for, you will be in default, and we will have the right to terminate your right of occupancy and exercise all rights and remedies under the agreement contract. You will be held directly liable and will deal directly with city officials including but not limited to section 8 inspectors, code compliance inspectors, police officers and any other party that deems the unit unclean and infested and will hold landlord/property manager harmless for bed bug, roach or other pest infestations.

- D. COOPERATION. If we confirm the presence or infestation of bed bugs or other bugs or rodents, you must cooperate and coordinate with us and our pest control agents AT YOUR EXPENSE. You must follow all directions from us or our agents to clean and treat the dwelling that is infested. You must remove or destroy personal property that cannot be treated or cleaned as close as possible to the time the dwelling is treated. We have the right to require you to temporarily vacate the dwelling and remove all furniture, clothing and personal belongings in order for us to perform pest control AT YOUR EXPENSE. If you fail to cooperate with us, you will be in default and we will have the right to terminate your right of occupancy and exercise all rights and remedies under the agreement contract. **YOU ALSO AGREE TO ALLOW US TO EXTERMINATE THESE PESTS IMMEDIATELY UPON DETERMINATION THAT INFESTATION HAS OCCURRED AND THAT YOU WILL REIMBURSE US FOR THIS EXTERMINATION.**

----- (Initial on line to the left to certify the above paragraphs regarding pest control and infestation.)

III. RESPONSIBILITIES OF LICENSEE, LICENSEE'S REPRESENTATIVE AND/OR LEGAL REPRESENTATIVE

- A. You, your representative and/or legal representative, to the extent specified in this agreement, are responsible for the following:
1. Payment of the monthly fees
 2. Supply of personal clothing, activities of daily living, medicine, medicine management and other normal day-to-day items and tasks including but not limited to doctor visits, transportation, case management and social worker appointment meetings and scheduling's.

IV. PROPERTY Maintenance

A. Licensee's General Responsibilities: Licensee, at Licensee's expense, must:

- (1) Keep the Property clean and sanitary;
- (2) Promptly dispose of all garbage in appropriate receptacles;
- (3) Take action to promptly eliminate any dangerous condition on the Property and/or room;
- (4) Certify that they will perform all activities of daily living without the help or assistance of any Evergreen Living Spaces representative such as showering, taking medications, shaving, cutting and preparing food, toileting, transportation, dressing and any other activity performed on a daily basis.
- (5) Certify that they have inspected their room and that the room is clean and well-maintained.

----- (Initial on the line to left to certify the above paragraphs regarding pest control and infestation.)

V. INDEMNIFICATION

_____ Each party hereby agrees to indemnify the other and the other's employees, officers, directors, agents, family members and other related parties against all damages for bodily injury, including death, or damage to real or tangible personal property to the extent proximately caused in the course of performing this Agreement.

_____ It is my intention and I understand that I am binding myself, my heirs, agents, relatives, executors, administrators, assigns and successors in interest, and understanding this, so hereby expressly release and discharge Evergreen Living Spaces, its agents, owners, landlords, directors, executives, successors, administrators, assigns, affiliates and agents from any claims against Evergreen Living Spaces created or arising out of, or in any way whatsoever related to the service or housing space provided. I hereby waive any claim for damages to persons or property, which may occur as the result of the use of the said premises. This waiver includes any negligent acts or omissions caused directly or in-directly by Evergreen Living Spaces or the owners of said Property, including its officers, directors, or employees and understand that my claims, which may in the future arise out of personal injuries, accident, death, hurricanes, tornadoes, rain, fire or other acts of God to the residence, myself or damage to my property of any kind, are hereby waived.

_____ I, and any and all family, relatives, attorneys, assignees and any others acting on my behalf hereby further agree to indemnify and hold harmless Evergreen Living Spaces, its owners, representatives, agents or Owners of said Property, including its officers, directors, or employees, from any claims or damages, which may occur to the undersigned licensee or to any child, invitee, or guest of the undersigned.

_____ It is understood and agreed that this agreement includes, but is not limited to, injuries occurring due to: slipping and falling on any surfaces wet or dry, transportation to and from the premises or any other location, fires, sprained or broken limbs, cuts, abrasions, eye injuries, bacterial infections, death, fights, riots, stabbings, tornados, hurricanes, floods, hail storms, acts of terrorism and any other acts of God, accidents or injuries on the property or off the property.

_____ Each party agrees to indemnify and hold harmless the other party and its employees, members, land-lord, successors, attorneys, family members, agents and assigns, from any claims, liabilities, losses, damages, and expenses asserted against the other party and arising out of the indemnifying party's negligence, willful misconduct, and negligent performance of, or failure to perform, any of its duties or obligations under this Agreement. The provisions of this indemnification are solely for the benefit of the parties hereto and not intended to create or grant any rights, contractual or otherwise, to another person or entity.

_____ Licensee will indemnify and hold harmless Evergreen Living Spaces, its agents, owners, directors and officers against all liability, including liability arising from death or injury to person or property during the term of this agreement, and any renewal or extension thereof, caused by any act or omission of the Licensee, or the family, guests, agents or employees of the Licensee. b) Licensee will indemnify and save Landlord harmless from all liability, damage or expense incurred by Landlord as a result of death or injury to persons or damage to property (including the Premises) where this Agreement required the Licensee to procure insurance for said liability, damage or expense and Licensee failed to do so.

_____ Evergreen Living Spaces, its agents, owners, directors and officers shall not be liable for any damage or loss to person or property caused by other licensees or other persons, or caused by theft, vandalism, fire, water, smoke, explosions or other causes unless the same arises solely from the omission, fault, negligence or other misconduct of Evergreen Living Spaces. Failure or delay in enforcing Agreement covenants of other Licensee shall not be deemed to be negligence, omission, fault or other misconduct.

VI. RULES

_____ I am aware that I may be fined and or discharged from the property for violation of house rules/destruction of property.

_____ I am required to notify (Management) of Evergreen Living Spaces a minimum of thirty days prior to vacating the premises.

_____ My payment (in full) is due by no later than the fifth day of each month.

_____ I understand that upon leaving an Evergreen Living Spaces location by my will or as a result from rule infractions I will not be eligible for a refund.

_____ I understand **that this agreement is not a lease.** Licensee holder may give a minimum of 30 day notice to vacate. Any damages by licensee will be the financial responsibility of the licensee. Management of Evergreen Living Spaces may terminate this licensee agreement at any time. Violation of house rules may result in fines or my dismissal from the property. Threats or acts of physical violence against other licensees or management will result in immediate termination of this license and may result in filing of criminal charges.

_____ I understand that “vacating” the premises is defined as all of my belongings and myself leaving the property after returning my key.

_____ I understand that some of the food used is sourced from the community. Licensees are expected to participate in these resources

_____ **Evergreen Living Spaces** reserves the right to relocate licensees to our other cooperatives at our discretion. Any costs associated with change of address or inconveniences caused by relocation are the sole responsibility of the licensee

_____ Under no circumstances are drugs, alcohol or other “non-prescribed” medication allowed in the property. I understand that if I have been found to be using or in possession of any of the above items, I will immediately be in violation of this agreement and will be asked to vacate the unit immediately.

_____ The Licensee acknowledges and agrees that **Evergreen Living Spaces** may install and operate security cameras within the interior (common areas) of the rental property for security and safety purposes. The Licensee consents to the use of such cameras and acknowledges that their presence is intended to enhance the security of the premises. The Licensee agrees not to tamper with, disable, or obstruct the operation of any security cameras installed. **Evergreen Living Spaces** shall comply with all applicable laws and regulations regarding the use of surveillance cameras.

VII. AGREEMENT AUTHORIZATION

We, the undersigned, have read this Licensee Agreement and agree to abide by the terms and conditions.

Dated _____

(Signature of Licensee) + **Print**

Dated _____

(Signature of Licensee’s Representative) + **Print**

Dated _____

(Signature of **Evergreen Living Spaces** Representative)

PERSONAL GUARANTEE OF PAYMENT

(Name or Organization)

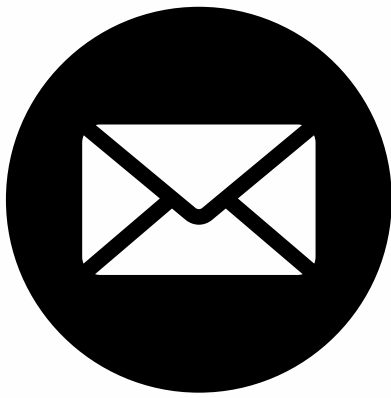
Personally guarantees payment of charges for the daily/monthly fees

Dated _____

(Signature of Guarantor) + **Print**



**Please send snapshot
of this page BEFORE MOVE IN**



Date: _____

Vital Mail Policy

Addendum to Licensee Agreement

This Addendum serves as a formal clarification and reinforcement of specific terms outlined in the original Licensee Agreement with Evergreen Living Spaces. This document is incorporated into and made part of that Agreement.

Property Address: 4725 Monument Drive Sacramento CA 95842

Licensee Printed Name: _____

Licensor: Evergreen Living Spaces

1. Mail and Address Use

The Licensee acknowledges and agrees that the property is a sober living environment and not a residential tenancy.

Only the following types of mail or documents are permitted to use the property address under this agreement:

- **Driver's license or state ID**
- **Employment records or payroll**
- **Social Security or disability benefits**
- **EBT or government aid programs**
- **Medical or legal documentation**

This authorization may be revoked at any time. The purpose of these restrictions is to preserve the nature of the license agreement and ensure compliance with all applicable housing laws.

Mail or packages sent outside of these allowed categories will be Returned to Sender.

Repeated or intentional violations may result in termination of the Licensee Agreement and immediate removal from the program.

2. Effective Date and Conditions

Beginning October 1, 2025, all new guests who need to receive vital documents at the property address must sign this Vital Mail Addendum prior to having mail sent.

- **Any mail received for a guest who has not signed this addendum will be Returned to Sender.**
- **Guests who are approved to receive permitted mail will be assessed a \$35 monthly convenience fee to cover mail management and retrieval. (assessed as part of monthly housing costs) Guests understand they will not receive a key to the mail box.**
- **It is understood that house mail will be retrieved once per week.**

Once a guest moves out or is asked to leave the property, all agencies and organizations sending mail will be contacted immediately to notify them that the individual no longer resides at this address.

3. Violation Consequences

Should a Licensee violate this mail policy, the Licensor reserves the right to:

- **Issue a written warning; revoke mailing ability and/or**
 - **Revoke the Licensee's right to occupy the premises, as outlined in the original agreement.**
- No refunds or credits will be provided for removal due to violation of this policy.**

4. Acknowledgment

By signing below, the Licensee affirms understanding and agreement with this Addendum. The Licensee further acknowledges that they are a licensee, not a tenant, and that California residential tenancy protections do not apply to their occupancy.

Print Licensee Name: _____

Signature: _____

Date: _____

Licensor Name: _____

Signature: _____

Date: _____



**Please send snapshot
of this page BEFORE MOVE IN**

For Virtual Check-Ins Only



Move-In Readiness Checklist:

Before entering the house, please make sure client:

- ☐ Completed pest control clothing check.
- ☐ Understands keypad entry and code.
- ☐ Signed all forms and copy of client ID

Case Manager Confirmation:

I confirm all of the above steps have been completed, and the client is ready to move in safely.

Case Manager
Initial Here:_____



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of this page **BEFORE MOVE IN**