

Department of Code Compliance Services Boarding Home Facilities

Resident Initial Screening and Individualized Assessment

Sec.	8A-34(a	ı) &	Sec. 8A-34(b)(c) of the Dallas City Code:
Poten	tial Res	ident	Name: Date:
scree direc	ning an t threat.	d in	g a potential resident to move into a boarding home facility, the licensee shall conduct an initial dividualized assessment of the individual to determine if the individual would constitute a dassessment must consider:
Yes	No	1.	Have you been convicted of the illegal manufacture or distribution of a controlled substance within the last 10 years? If yes, please list the type of <i>controlled substance</i> .
			If yes, the resident will not be allowed to reside at the home. Sec. 8A-34(b)(3)(c)(1)
Yes	No	2.	Are you currently on probation or parole? Please list the charge(s).
Yes	No	3.	Do you have any prior criminal or violent acts? If yes, what are they?
Yes	No	4.	If yes, what is the amount of time since the last offense or act?
Yes	No	5.	(Male Residents Only) Are you required to register as a Sex Offender? If yes, please attach a copy of a <u>Psycho-Sexual Evaluation and Assessment of Risk</u> performed within the last 3 years by a Licensed Sex Offender Treatment Provider (LSOTP) licensed under the Texas Occupations Code Title 3.110, Subchapters A and G, as amended. A copy of the Psycho-Sexual Evaluation Confirmation Letter can be obtained from your caseworker. The licensee shall ensure that any resident that has been convicted of an offense requiring registration with any sex offender registry is registered with the proper authorities.
Yes	No	6.	Are you currently an illegal abuser or addict of a controlled substance? If yes, please complete the Substance Abuse Recovery Plan and Drug Diversion forms. Please list the controlled substance(s).
Yes	No	7.	Do you require the provision of personal care services? If yes, list below the name of the person and/or company that will provide the personal care services?



Department of Code Compliance Services Boarding Home Facilities Resident Initial Screening and Individualized Assessment

Yes	No	8. Are you qualified to reside at this boarding home facility, if this boarding home facility is available only to persons with disabilities or to persons with a particular type of disability?
Yes	No	9. Do you agree to comply with the requirements of being a resident at the boarding home facility?
Yes	No	10. Do you agree to pay rent or other fees in accordance with the Service Agreement between you and the operator, unless the payment of rent or the fees are excused under the service agreement or by law?
Yes	No	11. Do you agree to comply with the rules of the boarding home facility?
Yes	No	12. Do you agree to pay for any damage to the boarding home facility that is a result of your action?
Yes	No	13. Do you agree to vacate the facility in a timely manner when the Service Agreement including any extension expires or is terminated?

The licensee must also provide a sworn affidavit based on the individualized assessment performed for each resident. The licensee shall not allow the following individuals to reside in a boarding home facility:

- 1. An individual convicted within the last 10 years of the illegal manufacture or distribution of a controlled substance.
- 2. An individual who, based upon the individualized assessment, is likely to constitute a direct threat to the health or safety of the individual or other individuals or whose tenancy would likely result in substantial damage to the property of others.
- 3. An individual who requires the provision of personal care services unless the personal care services are provided by outside professionals.

I agree that the information that I have provided above, is correct to the best of my knowledge.		
Resident Signature:	Date:	
Owner/Operator Signature:	Date:	



Department of Code Compliance Services Boarding Home Facilities Resident's Service Agreement

Sec. 8A-34(k)(1)(2) of the Dallas City Code:

Resident Name:	Date:				
The following information must be provided if applicable:					
The length of time you agree to stay is per week/month/year					
The rent per week/month/year is \$. The rent is due on the day of the month.				
The person responsible for paying the rent is					
If a resident provides services for the operator in lieu	or rent, then the rent is reduced in the amount of				
\$ which is equal to \$ per hour (x)					
Other fees/fines charged \$					
Explanation of other fees/fines charged					
When the other fees/fines are charged					
Why the other fees/fines are charged	?				
Contact information for the person responsible for paying to Name: Address: Email: Phone:					
(Please check boxes that the boarding home facility provides)					
The boarding home facility provides the following such a	as (meals, medications assistance, laundry,				
\square hygiene products, \square transportation \square bed linen \square or or					
Resident's legal guardian, legally authorized representative Name: Address: Email: Phone:	· · · · · · · · · · · · · · · · · · ·				



Department of Code Compliance Services Boarding Home Facilities Resident's Service Agreement

Please see the attached the rules and regulations of the boarding home facility.

A resident will be expelled if the owner or operator determines that the resident:

- 1. Has used a controlled substance within the 30 days without a valid prescription.
- 2. Has violated the rules of the boarding home facility if those rules require the expulsion for the violation.
- 3. Poses a direct threat to the health or safety of other individuals

Lagree that the information provided is correct

- 4. Poses a direct threat of substantial damage to the property of others.
- 5. Are you aware that in Texas, a landlord must legally terminate the tenancy before evicting a tenant? The landlord must first give the tenant a written notice, as required by state law. If the tenant does not move out after received this notice, then the landlord can file an eviction lawsuit. Property Code: Title 4 Actions and remedies: Chapter 24 Forcible Entry and Detainer: Sec. 24.005 Notice to vacate prior to Filing Eviction Suit.

If the resident earns any income from the licensee or an employee of the boarding home that exceeds the rent owed, the licensee or employee shall disclose in writing the amount of such fee and the plan to allocate the income or the system of disbursement of the income.

No licensee or employee may charge a resident for a service or item unless the licensee or employee has previously disclosed in writing that providing the service or item will incur an additional fee and the amount of the fee.

Operators, employees, and volunteers of the boarding home facility shall not have visitors on the premises, except for visitation necessary for the operation of the facility, for emergencies, or by family members of an operator, employee, or a volunteer.

F		
Resident Signature:	Date:	
Owner/Operator Signature:	Date:	



City of Dallas Department of Code Compliance Services Boarding Home Facilities Privacy Policy

Sec. 8A-34(n) of the Dallas City Code:

Boarding Home Facility agrees to
maintain the confidentiality of each resident's financial, medical and health information. Only by the resident's written consent of the release of information will resident's financial, medical and health information be released. The owner, operator, or licensee shall give a copy of the privacy policy to the resident, the resident's guardian, or the resident's legally authorized representative.
Resident Printed Name:
Resident Signature:
Operator Printed Name:
Operator Signature:
Date:



Department of Code Compliance Services Boarding Home Facilities Resident Assessment and Periodic Monitoring

Sec. 8A-15(a)(b)(15) and Sec 8A-39 of the Dallas City Code

For any resident with dementia or who has been prescribed a controlled substance or psychotropic medication, the licensee, or a designee of the licensee, shall complete and document an annual assessment and conduct periodic monitoring to ensure that each resident is capable of self-administering medication and completing basic elements of personal care.

		Initial Assessment	□ Periodic Monitorir	ng (□ Annual Assessment		
Reside	ent Name:				Date:		
1.	What is the	name of your medicati					
2. What is the reason this medication is taken? (Optional)							
3.	What is the	What is the color or shape of the medication that you are taking?					
4. What is the number of pills for each medication that you take? (dosage)							
5.	5. What time do you take your medications?						
6.	Is the residen	t able to read their me		Yes	No		
7.	Is the residen	t able to eat without as	ssistance?	Yes	No		
8.	Is the residen	t able to bathe without	assistance?	Yes	No		
9.	Is the resident	t able to dress without	assistance?	Yes	No		
10.	Is the resident	t able to move and tran	nsfer independently?	Yes	No		
			Page 1 of 2				
C	CS-FRM-029-BH	1	10/19/2020			Rev 2	



Department of Code Compliance Services Boarding Home Facilities Resident Assessment and Periodic Monitoring

If the licensee finds that a resident is in a state of possible self-neglect due to no longer being able to perform basic elements of personal care and believes that a higher level of care is need the owner or operator shall:

- 1. Contact the Texas Department of Family and Protective Services by contacting the state-wide intake division at 1-800-252-5400.
- 2. Notify the resident's guardian, legally authorized representative, or a family member designated by the resident; and
- 3. Contact the appropriate health or human services authority to advise that the resident requires services beyond what can be provided by the boarding home facility. (North Texas Behavioral Health Mobile Crisis Line at 1-866-260-8000)

A state of self-neglect does not exist if the resident receives outside professional services that meet the resident's need for personal care or self-administration of medication. In these cases, the resident can remain in the boarding home facility provided that all needs for personal care and self-administration of medication are met and provided by an outside professional agency or home health care provider.

Resident Signature:	Date:
Owner/Operator Signature:	Date:



Department of Code Compliance Services Boarding Home Facilities Definitions of Abuse, Neglect, or Exploitation (Chapter 48 of the Texas Human Resource Code)

Sec. 8A-34(i)(1)(2)(3)(4) of the Dallas City Code:

A licensee shall report and document any allegations of abuse, neglect, or exploitation of a minor or adult age 65, or an adult with a disability to the Texas Department of Family and Protective Services. Failure to report suspected abuse, neglect or exploitation of a minor, an elderly adult, or an adult with a disability is a Class A misdemeanor under Texas law. A licensee shall ensure that no resident is harassed, threatened, or intimidated at any time for making a report of abuse, neglect or exploitation. A licensee shall provide each resident with a copy of the definitions of abuse, neglect, or exploitation as outlined in **Chapter 48 of the Texas Human Resources Code** as amended. A licensee shall allow law enforcement, emergency medical, and fire personnel access to the boarding home facility when these professionals are responding to a call at the boarding home facility.

Chapter 48 of the Texas Human Resources Code:

Sec. 48.001. PURPOSE. The purpose of this chapter is to provide for the authority to investigate the abuse, neglect, or exploitation of an elderly or disabled person and to provide protective services to that person.

Sec. 48.002. DEFINITIONS. (a) Except as otherwise provided under Section 48.251, in this chapter:

- (1) "Elderly person" means a person 65 years of age or older.
- (2) "Abuse" means:
- (A) the negligent or willful infliction of injury, unreasonable confinement, intimidation, or cruel punishment with resulting physical or emotional harm or pain to an elderly or disabled person by the person's caretaker, family member, or other individual who has an ongoing relationship with the person; or



Department of Code Compliance Services Boarding Home Facilities Definitions of Abuse, Neglect, or Exploitation (Chapter 48 of the Texas Human Resource Code)

- (B) sexual abuse of an elderly or disabled person, including any involuntary or nonconsensual sexual conduct that would constitute an offense under Section 21.08, Penal Code (indecent exposure) or Chapter 22, Penal Code (assaultive offenses), committed by the person's caretaker, family member, or other individual who has an ongoing relationship with the person.
- (3) "Exploitation" means the illegal or improper act or process of a caretaker, family member, or other individual who has an ongoing relationship with an elderly or disabled person that involves using, or attempting to use, the resources of the elderly or disabled person, including the person's social security number or other identifying information, for monetary or personal benefit, profit, or gain without the informed consent of the elderly or disabled person.
- (4) "Neglect" means the failure to provide for one's self the goods or services, including medical services, which are necessary to avoid physical or emotional harm or pain or the failure of a caretaker to provide such goods or services.
- (5) "Protective services" means the services furnished by the department or by a protective services agency to an elderly or disabled person who has been determined to be in a state of abuse, neglect, or exploitation or to a relative or caretaker of an elderly or disabled person if the department determines the services are necessary to prevent the elderly or disabled person from returning to a state of abuse, neglect, or exploitation. These services may include social casework, case management, and arranging for psychiatric and health evaluation, home care, day care, social services, health care, respite services, and other services consistent with this chapter. The term does not include the services of the department or another protective services agency in conducting an investigation regarding alleged abuse, neglect, or exploitation of an elderly or disabled person.



Department of Code Compliance Services Boarding Home Facilities Definitions of Abuse, Neglect, or Exploitation (Chapter 48 of the Texas Human Resource Code)

(6) "Protective services agency" means a public or private agency, corporation board, or organization that provides protective services to elderly or disabled persons in the state of abuse, neglect, or exploitation.
(7) "Department" means the Department of Protective and Regulatory Services.
 (8) "Disabled person" means a person with a mental, physical, or developmental disability that substantially impairs the person's ability to provide adequately for the person's care or protection and who is: (A) 18 years of age or older; or (B) Under 18 years of age and who has had the disabilities of minority removed.
I,, have been provided a copy of and read the definitions of abuse, neglect, and exploitation as outlined in Chapter 48 of the Texas Human Resource code as amended.

Owner/Operator Signature: ______ Date: _____

Resident Signature:

Date: _____



Department of Code Compliance Services Boarding Home Facilities Drug Diversion Policy

Sec. 8A-34(d)(1)(2) of the Dallas City Code:

All residents in a boarding home facility shall completely abstain from using controlled substances. The licensee shall expel as promptly as possible under state law any resident who uses a controlled substance, whether on or off the premises, and shall not readmit the resident to any boarding home facility under the control of the licensee for a period of at least 60 days following the violation. However, nothing contained in this subsection may be construed to prohibit a resident from taking a prescription drug for which that resident has a valid and current prescription.

Definition: Drug diversion is the use of a prescribed drug for recreation reasons other than it was prescribed.

Drugs with potential abuse include, but are not limited to:

- 1. Benzodiazepines Valium
- 2. Opiates Pain Killers

Sec. 8A-35(d-g) of the Dallas City Code:

Drugs with potential for abuse and all other residents' medication will be kept locked in a storage area with access limited to the designated person responsible for medication assistance.

- 1. The person designated for providing medication assistance must be available at all times and maintain a key that will not be distributed to other residents.
- 2. The person responsible for maintaining the medication will conduct a count of the medication if diversion is suspected in the presence of a witness such as the manager and or owner/operator.

Any suspected abuse of drugs must be reported to the owner/operator of the boarding home facility.

If necessary, law enforcement will be notified in the event of an alleged theft of medication.

The owner/operator, with a signed release of information, may report the alleged abuse to the resident's physician.



Department of Code Compliance Services Boarding Home Facilities Substance Abuse Recovery Plan

Sec. 8A-34(d)(1)(2) of the Dallas City Code:	
Resident Name:	Date:
licensee shall expel as promptly as possible whether on or off the premises and shall not rea of the licensee for a period of at least 60 day	all completely abstain from using controlled substances. The under state law any resident who uses a controlled substance, admit the resident to any boarding home facility under the control is following the violation. However, nothing contained in this lent from taking a prescription drug for which that resident has a
controlled substance, the licensee must develop	residents who are recovering from an addiction to alcohol or a a written plan for ensuring that the residents continue to refrain y and all rules by which residents must abide and must provide
Any person with a history of substance abuse meturn to the facility after the 60 day suspension	nust commit to a plan of continued recovery. If you so choose to a, you must abide by the following rules.
 The resident must attend a daily 12 s Substance Abuse Recovery Group. 	step meeting for the first 90 days or a Supportive Outpatient
2. Obtain a 12 step Sponsor to work with y	ou on a sobriety plan.
3. Submit to either random Urine Analysis	or Breath test.
If additional resources are required, the boarding	g home will provide upon request.
I,with the Operator of the boarding home.	, agree to the above-mentioned requirements as discussed
Resident Signature:	Date:

Date: _____

Owner/Operator Signature:



Department of Code Compliance Services Boarding Home Facilities

	Resident's Medical and Mental Health Contact Information					
Sec 8.	Sec 8A-34(i)(6)(A)					
Resid	ent:			Date of Birt	h:	
		medical/mental health professional's cation officer etc.:	contact information b	pelow such as, casewo	rker, doctor, RN,	
Active	Inactive	Name of Medical/Mental Health Professional	Agency	Address	Phone	
			÷			



City of Dallas Department of Code Compliance Services Boarding Home Facilities

Residents' Budget Plan Agreement

Sec. 8A-34(j)(4) of the	Dallas City Code:	
Resident:		Month/Year:
Source of Income:		Amount of Income:
Expenditures:	Rent: \$	
Allowance per week/b	iweekly/monthly: \$	
	Cigarettes: \$	
	Clothing/Shoes: \$	
	Bus Passes: \$	
	Entertainment: \$	
	Other: \$	
	Other: \$	
	Balance: \$	
(Resident)		has discussed and agreed with the above
routine expenditures w	ith the (Operator)	
Resident's Signature:		Date:
Operator's Signature:		Date:

Photocopies of receipts for expenses incurred must be attached to this form.



Department of Code Compliance Services Boarding Home Facilities

Representative Payee or Money Management Assistance Financial Records

Sec. 84-34(j)(4)

	ems on behalf of the resident. Also, when a
Representative Payee/Money Manago	e Payee/Money Manager purchases items
Resident's Name:	Copies of receipts must be provided when the Representativ

If the boarding home facility owner, operator or employee is the representative payee for a resident or assist a resident with general money resident receives a cash allowance they must sign below or be issued a receipt signed by both the payee and resident. management, then a surety bond must be furnished according to Sec. 8A-34(j)(4)(F).

Month					
Date	Memo	Deposit	Withdrawal	Balance	Resident's Signature
Month					
Date	Memo	Deposit	Withdrawal	Balance	Resident's Signature



Department of Code Compliance Services Boarding Home Facilities Risk Assessment

Sec. 8	8A-34(b)(2) of the Dallas City Code: (Male Resid	ents Only)
Resid	dent:	
The a	above-named resident who resides at	Boarding Home Facility
has co	completed a risk assessment that was conducted on	(date)
	ed on the results of the risk assessment the following categories. The risk level estimates the chan	
	Low	
	Moderate-low	
	Moderate-high	
	High	
Please	se provide or attach a brief description of the risk l	
Print 1	t Name:	Organization Name:
Addre	ress:	Telephone Number:
Email	il:	
	ature:	

The assessment of risk must be performed by a Licensed Sex Offender Treatment Provider (LSOTP) licensed under the Texas Occupations Code Title 3.110, Subchapters A and G, as amended, within the past 3 years.



Department of Code Compliance Services Boarding Home Facilities Resident's Injury, Incident and Unusual Accident Report

Sec. 8A-34(g) of the Dallas City Code:
(Name of Operator/Boarding Home)shall investigate and document on this form any injuries, incidents, or unusual accidents to a resident by providing the following information:
Resident's Name:
Date of injury, incident or unusual accident:
Time of injury, incident or unusual accident:
Description of injury, incident, or unusual accident:
Description of any medical or mental health treatment the licensee sought for the resident:
Steps taken by the owner or operator to prevent future injuries, incidents, or unusual accidents if a problem at the boarding home facility resulted in the injury, incident, or unusual accident:



Department of Code Compliance Services Boarding Home Facilities Resident's Injury, Incident and Unusual Accident Report

(Name of Operator/Boarding Homresident)	''s legally authorized, the legal guardian, or the legally	representative, or a family
The name and date of person(s) not person's contact information.	ified of the injury, incident, or un	usual accident and the
Name	Contact information	Date
Owner/Operator/Staff's Signature:		Date:
Resident's Signature:		Date:



Department of Code Compliance Services Boarding Home Facilities Allegations of Abuse, Neglect and Exploitation Report

Sec. 8A-34(i)(1) of the Dallas City Code: Name of Resident: _____ Age: ____ Address: Name of Person Making the Report: Name of Assigned Investigator: Case Number: Date of Complaint: Description of what happened: List any current injuries, medical problems, or behavioral problems:



Department of Code Compliance Services Boarding Home Facilities Allegations of Abuse, Neglect and Exploitation Report

What steps are taken by the owner/operator to prevent the continuexploitation?	
,	
Name of Perpetrator(s) (if known):	
Explain how you became aware of the situation:	
Was the Texas Department of Family Protective Services contacted at	1-800-252-5400?
(Yes) ☐ (No) ☐ If yes, provide date contacted:	
Resident Signature:	Date:
Owner/Operator Signature:	Date:



Department of Code Compliance Services **Boarding Home Facilities Medication Log**

Sec. 8A-34(f) of the Dallas City Code: (Only for residents with dementia currently taking a prescription medication or if a resident is taking a controlled substance or a psychotropic medication with a valid prescription)

Resident:	-							_											M	ontl	ı/Υe	ear:										
Name of Medication/Dosage/Frequency	Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	3
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																																İ
			_						_																							_
Name of Medication/Dosage/Frequency	Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Name of Medication/Dosage/Frequency	Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	3
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esident Signature:													Da	ite:								Code	s	A	Abse	nt			RF	Re	fille	d
																							- 1		Disco		ued					
taff Signature:											_		Da	ite:									-	_	Refu: Hosp		red	+		-		_
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City of Dallas Department of Code Compliance Services Boarding Home Facilities Disability Report

Sec. 8A-6(a)(13) & Sec. 8A-8(c)(2)(3)

Boarding Home Facility Name:	
Facility Address:	
Total number of residents with a disability listed	
Current number of residents as of this date:	
NOTE: In the below chart, please list only the nuthere are impairments other than the ones listed, necessary to identify the impairment, only the number listed.	•
Vision Impairment:	Hearing Impairment:
# of Residents with this disability:	# of Residents with this disability:
Mobility Impairment:	Dementia:
# of Residents with this disability:	# of Residents with this disability:
Other:	
# of Residents with this disability:	
Sec. 8A-7 Any new categories of disabilities served by the our Boarding Home Facilities Office within 10	
Operator's or Owner's Signature:	Date:



City of Dallas Department of Code Compliance Services Roll of Current and Former Residents **Boarding Home Facilities**

Sec. 84-15(b)(16)(17)of the Dallas City Code:

Disposition				
Moved To (Name, Address & Phone #)				
Departure Date				
Arrival Date				
Assigned				
Referred From (Name, Address & Phone #)				
Name				



Department of Code Compliance Services Boarding Home Facilities Emergency Evacuation Plan and Emergency Exit Training

Sec. 84-29(b)(c)(d) and Sec. 84-29(j)

obtain its approval of the plan. The licensee shall post an emergency evacuation plan in each sleeping room and the kitchen of the facility. The licensee shall ensure that each resident receives training on the emergency evacuation plan at least two times per year and shall maintain documentation of such training. The licensee shall ensure that all emergency. If a boarding home facility has a resident who is non-ambulatory or has a mobility impairment, the license shall submit the written plan to Dallas Fire Rescue and residents are shown how to use all emergency exits from the boarding home facility within 24 hours after arrival at the boarding home facility. The licensee shall maintain The licensee shall implement a written fire and evacuation plan that sets forth the responsibilities and steps to be taken by staff and residents in the event of a fire or other documentation of such training.

Instructor				
2 nd Emergency Evacuation Plan Training Date				
1st Emergency Evacuation Plan Training Date				
Emergency Exit Training Date				
Resident's Arrival Date				
Residents Signature				

	Rev 2
Date:	
	11/30/2017
Operator Signature:	CCS-FRM-042-BH



In-Service Education of Boarding Home Facility Staff Training Log City of Dallas Department of Code Compliance Services **Boarding Home Facilities**

Sec.84-36 of the Dallas City Code:

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Subject	Date	Trainer	
Employer Rules and Policies			Г
Preventing Abuse, Neglect and Exploitation			
Residents' Rights			Г
Chapter 102 (Rights of Elderly)			ľ
Chapter 112 (Developmental Disabilities)			
Chapter 301 (Fair Housing Practices)			Т
Chapter 92 (Residential Tenancies)			
Contacting Emergency Personnel when Health, Safety of Resident is at Risk			
Compliant Process Specific to City of Dallas			
Preventing, Recognition and Reporting Injuries, Incidents and Accidents			
Emergency, Evacuation and Disaster Plans			
Assisting with Health and Social Services			
Meals/Sanitation/Laundry/Housework/Assistance with Self-Admin of Meds			
Changes in Policy/Procedures			
New Resident Orientation			
Modification of Residents Needs or Health Changes			

8/24/2015



SECTION 8A-34(b)(4)

Dallas City Code Section 8A-34(b)(4) Policies and Procedures to Ensure Resident Health and Safety (This form must be filed with the director of the department.)

The State of	Texas)				
Dallas Coun	ty)				
			, affiant, know	authority, n to me (or pre exas driver's lice	oved to me on	the oath of
name is subs	scribed be	low, who,	-	ly sworn, depose	· ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
turpitude, a	ind am c with and h	apable o nave perso	of making this	, am of soun ny or crime inv affidavit. In of the facts state	addition, I an	n personally
				operate a board an address of		
proposed re individualize whose tenan	sident wo ed assessn cy would ividuals o	ould const nent, no likely con	titute a direct t person will or 1stitute a direct	assessment to d hreat has been does reside in threat to the hea esult in substan	conducted. Be the boarding lalth or safety or	ased on that home facility f that person
Affiant's Sig	nature			Title (if any)		
	ED AND			ME the unders	igned notary p	ublic on the
				Notary Public i	n and for the St	tate of Texas
Print name:						
My Commis	sion Expir	es:				



Department of Code Compliance Services Boarding Home Facilities Additional Owners, Operators, Employees & Volunteers List

Please print all information clearly and provide a clear copy of the driver's license or identification card for all listed below. Along with this form you must provide a copy of the Texas Criminal History Report and fingerprint card for all owners, operators, employees and volunteers listed below. You can schedule an appointment for the criminal history report at the listed website for IdentoGo https://uenroll.identogo.com.

Facility Address:	Applicant:	Date:		
Legal Name:				
Have you lived in a state other than Te	•			
If yes, what state?		dditional criminal history report for that state is required)		
Home Address:	Mailing	Address:		
Email Address:				
Telephone Number:	Driver's	s License or State identification provided -		
	☐ Yes	□ No #		
Position (please circle one): Owner, Op	perator, House Manager, Cook, Ho			
Legal Name:				
Have you lived in a state other than Te	exas within the last 10 years? 🗆 Y	es 🗆 No		
If yes, what state?	(If yes, an ad	ditional criminal history report for that state is required)		
Home Address:	Mai	ling Address:		
Email Address:				
Telephone Number:	Driv	ver's License or State identification provided -		
	_ Y	/es □ No #		
Position (please circle one): Owner, Operator, House Manager, Cook, House Keeper, Other (list below)				
Legal Name:				
Have you lived in a state other than Texas within the last 10 years? ☐ Yes ☐ No				
If yes, what state?		additional criminal history report for that state is required)		
Home Address:	Mai	ling Address:		
Email Address:	·			
Telephone Number:	Driv	ver's License or State identification provided -		
*		es □ No #		
Position (please circle one): Owner, Operator, House Manager, Cook, House Keeper, Other (list below)				
<u> </u>				



Department of Code Compliance Services Boarding Home Facilities Notice of Owner/Operator/Employee/Volunteer Changes

Sec. 8A-7 of the Dallas City Code:	Date of Update:
	nst be provided to the Boarding Home Facilities Office within 10 my new criminal convictions or charges brought against any
This notice is to report a change of employment	ent at (Facility Name)
Boarding Home Facility located at (Address of	f Facility)
New employee/volunteer,	, will assume
responsibilities as of,	, 20 The owner's/operator's, employee's and/or e listed below. A copy of the owner's/operator's, employee's fication card, criminal history report and fingerprinting card
Telephone Number:	
Did you provide the criminal history report	rt for this person? □ Yes □ No
• If yes, what State?(I	Texas within the last 10 years? □ Yes □ No f yes, an additional criminal history report is required for that State.) nal history report for this person? □ Yes □ No □ N/A
Did you provide the fingerprint card for the state of the state o	is person? □ Yes □ No
Did you provide the driver license/identif	ication card for this person? Yes No
Employee/Volunteer, responsibilities and now will be a residen	t. will no longer assume
Employee/Volunteer,on the premises.	, has been terminated and will no longer reside/work
Employee/Volunteer,premises.	, has resigned and will no longer reside/work on the
Operator's Signature:	Date:
Employee's/Volunteer's Signature:	Date:
CCS-FRM-038-BH	11/30/2017 Rev 3



Department of Code Compliance Services Boarding Home Facilities Boarding Home Facility Posting Requirements

Sec. 8A-16(5)(A)(B) of the Dallas City Code:

North Texas Behavioral Health Authority
24/7 Mobile Crisis Assistance Hotline – 1-866-260-8000
After Hours Clinic – Mon-Fri 4pm-10pm & Sundays 2pm-7pm
4333 Gannon Lane Suite 101
Dallas, TX 75237

NAMI (National Alliance on Mental Illness) 2812 Swiss Ave. Dallas, TX 75204 214-341-7133

Suicide and Crisis Center 2808 Swiss Ave. Dallas, TX 75204 24 hr. Crisis Line 214-828-1000

Adult Protective Services Abuse Hotline 1-800-252-5400

Texas Department of Aging and Disability Services (DADS) Region 3 801 S. State Hwy 161 Grand Prairie, TX 75051 **1-800-337-6377**



Department of Code Compliance Services Facility Complaint Registration **Boarding Home Facilities** City of Dallas

Sec. 84-16(2) of the Dallas City Code:

Boarding Home Facilities For Complaints on Please Contact: 311

Or

214-670-1972