Day by Day sober homes operate as a family-oriented recovery environment. It is designed to support individuals who ***desire*** recovery. We provide an atmosphere where individuals can develop a sober lifestyle through community building, accountability and structure. Our program is outlined below.

**FEES:** $100 Service Fee **(non-refundable entry fee)**

$750 /Monthly Program Fee (shared room)

* **SPONSOR:** Must keep a recovery sponsor that you meet weekly and work steps with.
* **RECOVERY MEETINGS:** Minimum of3 recovery meetings per week.
* **PRODUCTIVE TIME:** 20-40 hours of outpatient, work, school and/or volunteer.
* **HOUSE MEETING:** Attend mandatory weekly house meeting.
* **CHORE:** Each resident does their daily chore. Residents clean entire property.
* **CURFEW:** 11pm daily.
* **OVERNIGHTS:** After 30 days a resident **could** be eligible for 1 or 2 overnight(s) per week. It must get approved.
* **CELL PHONE:** Must have a cell phone that receives calls & text. No video recording or video calls on property.
* **LEGAL/PROFESSIONAL:** Must maintain all legal/professional obligations.
* **PROHIBITED:** Illegal drugs/alcohol or Illegal activity, sex, weapons, violence, intimidation, foul language, stealing, toxic behavior or drama and no intimate relationships allowed on or near property.
* **SLEEP:** Only in your bed and no laying around the house or sleeping all day.
* **ROOMS:** Only enter your room, keep music at a respectable level.

Laptops allowed.

* **IOP:** Must attend your IOP program**.**
* Follow any additional in-house rules. Smoking is ONLY permitted outside backyard and prohibited in the house.
* **PERSONAL ITEMS:** Day by Day Living is not responsible for personal items damaged or stolen during stay or after moving out; keep personal belongings in your room.
* **HOUSE:** Furniture doesn’t move, no adding to the walls/décor/furniture; practice ‘reduce, reuse & recycle*.*
* **HEALTH:** Must stay healthy. Take medications appropriately (keep in lockbox). No narcotics allowed. MAT program accepted.
* **CONFLICT RESOLUTION:** All residents resolve issues with an open, honest, kind discussion with a solution. Report any suspect behavior.
* **VACATING:** Any resident, at any time, for any reason may be asked to vacate the property & program. Resident agrees to vacate immediately. If a resident is asked to leave because of a relapse or corrupt behavior, other residents still residing at Day by Day Living homes are asked to NOT contact them.
* I have read and understand Day by Day sober home residential agreement. This agreement is subject to change at any time. The updated agreement will supersede any previous agreement. *This is NOT a landlord/tenant contract; this is a sober housing residential agreement.*
* Violations of this agreement will immediately forfeit your sober housing at Day by Day sober homes.

***“HUSTLE YOUR RECOVERY”***

COMPLETION OF SERVICES AGREEMENT

***Purpose:*** *A Service Fee was given to obtain a bed for residency at Day by Day Living LLC sober homes.*

The Service Provider has completed service in full by a phone interview and reserving a bed for the potential resident as agreed upon. The undersigned individual hereby acknowledges that all services were provided as described on the residential agreement and/or described during the phone interview. Further, acknowledgement of completion includes that the resident did not identify any issues at completion. This agreement is in affect at the time of signing and/or payment of the service fee; *if a resident pre-pay and never moves in, all monies are forfeited since a bed was reserved for the purpose of an expected move in*. If a resident moves out without a proper notice or relapse or violates the residential agreement and/or expectations, they will forfeit all monies paid.

HOLD HARMLESS AGREEMENT

The undersigned will hold harmless and indemnify Day by Day Living LLC, its’ owners and staff against any personal liability, personal injury (including death), claims, suits, action, damage or loss. In addition, the undersigned agrees not to make deliberate statements that intend to harm the reputation or acts of defamation (including any hearsay) towards Day by Day Living LLC without factual evidence.

ARBITRATION AGREEMENT

We recognize differences may possibly arise between Day by Day Living LLC and its residents. Both the Company and the resident agree to resolve any and all claims, disputes or controversies arising out of or relating to sober living matters at Day by Day Living LLC exclusively by final and binding arbitration administrated by the Business Consumer Alliance (“BCA”) Uniform Rules for Binding Arbitration. Claims that will be covered by arbitration include, but not limited to, service fees, monthly program fees, discrimination and harassment on the basis of race, sex, age, national origin, religion, disability or any other unlawful basis.

The Company and the resident agree that binding arbitration shall be the sole and exclusive remedy for the resolution of the claims covered by this agreement. Information of BCA Arbitration is available on the BCA website (checkbca.org). The resident understands if the resident files a complaint regarding a dispute arising out of or relating to the residency at Day by Day Living LLC must use this agreement in support of its request; that another entity or court to dismiss the complaint and require the resident instead to participate in arbitration of the dispute.

**Notice: By signing this agreement the resident agrees to have any dispute with Day by Day Living LLC to be decided by the Business Consumer Alliance (“BCA”) Uniform Rules for Binding Arbitration and you are giving BCA the right to arbitrate your dispute. Also, the undersigned individual hereto agrees to the foregoing structure and agreements as evidenced by their signature below.**

**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_

House:

**Print Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Rev. 5/21/2024*

*Page 2*