

Adult Family Home Management Agreement: Attestation Information and Attachments

| Contact Information | |
|--|---|
| Name of Home | |
| Name of Applicant / Licensee | Adult Family Home (AFH) license number (if applicable) |
| Name of Management Entity ("Manager") | |
| Mailing Address of Manager | |
| Unified Business Identifier (UBI) of Manager | Federal Employer Identification Number (EIN) of Manager |
| Name of Contact Person (for management agreement) | |
| Telephone Number (include area code) of Contact Person | Email Address of Contact Person |
| Management Agreement Effective Date: | |

This form is used in compliance with Washington Administrative Code (WAC) [388-76-11050](#).

All three pages of this form must be included in your submission, along with the following attachments:

1. Copy of written management agreement.
2. Copy of notice to residents / representatives of management agreement.
3. Organizational chart which shows the relationship between the adult family home, manager, and all related entities, including manager staff.

New AFH Applicants: Include completed form and attachments with your license application.

Existing licensed AFHs: Email completed form to RCSBOA@dshs.wa.gov.

Adult Family Home Management Agreement: AFH License

This attestation form must be completed and submitted with a management agreement when applicant / licensee will use a management company at the Adult Family Home. The attestation must be verified and signed by an officer, director, or owner of 5% or more of the applicant / licensee who has signature authority.

| | | |
|---|---------------------------------------|--------------|
| Name of Home | | |
| Name of Applicant / Licensee's Name | Name of Management Entity ("Manager") | |
| <p>The signatory must initial each statement below.</p> <p>I certify and declare under penalty of perjury that the following is true and correct:</p> <p>_____ The applicant / licensee has a written management agreement with the above manager.</p> <p>_____ The management agreement complies with the Adult Family Home licensing requirements in Chapter 70.128 RCW and Chapter 388-76 WAC,</p> <p>_____ The written management agreement creates a principal / agent relationship between the applicant / licensee and the manager;</p> <p>_____ The management agreement does not delegate to the manager the licensee's legal responsibility to ensure that the Adult Family Home is operated in a manner consistent with applicable laws and regulations,</p> <p>_____ The management agreement does not delegate to the manager the responsibility to review for accuracy, acknowledge, and sign all initial and renewal license applications,</p> <p>_____ The management agreement does not authorize the manager to represent itself as the licensee or give the appearance that it is the licensee,</p> <p>_____ All resident agreements shall be agreements between the resident(s) and the applicant / licensee as parties, even if they are executed by the manager on behalf of the applicant / licensee,</p> <p>_____ The applicant / licensee agrees to notify all residents and prospective residents in advance of the identify of the manager, the fact that the manager is retained on behalf of applicant / licensee, and shall be given contact information for the manager and the licensee,</p> <p>_____ The manager may use resident records and information to fulfill it's obligations under the management agreement but shall preserve the confidentiality of such records and shall not disclose or release them except as authorized by law. The applicant / licensee shall retain responsibility for such records and shall not transfer such responsibility to the manager unless the manager first becomes duly licensed to operate the adult family home as licensee.</p> <p>_____ Applicant / licensee shall provide notice to DSHS in case of any of the following:</p> <ul style="list-style-type: none"> • Discharge of manager, • Change of manager, or • Modification of existing management agreement, except regarding a change in the duration of the agreement. <p>I am duly authorized by applicant / licensee to sign this attestation on its behalf. I am an officer director, or owner of 5% or more of the applicant / licensee.</p> <p>I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct to the best of my knowledge.</p> | | |
| Signature* | Date Signed | Printed Name |
| City and State Signed | Title | |

* May not be signed by Manager or Resident Manager.

