Building Safety 480-644-4273 Fax 480-644-2418

City of Mesa Construction Permit



Development Services P.O. Box 1466 Mesa, Arizona 85211-1466 www.mesaaz.gov

Construction Perm PMT23-03490

Record: PMT23-03490

Printed On: 4/1/2024

Issued On:

Project Address: 6302 E QUARTZ ST, MESA, AZ 85215

Zoned: RS-9 PAD

Subdivision: RIDGEVIEW UNIT 2 LOT 131-282

Lot: 202

Assessor Parcel: 14169319

Census Tract: 420211

Sales Tax Code: 041000

Classification: Non-Structural Units: Buildings:

Valuation: \$0.00

Occ Grp	Const Type	SqFt	Occ Load
R-4 Residential Care/Assisted Living	Not	1838	10
	Total SQ FT :	1838	

OWNER: JUST MY FAVS TRUST

Address: 6302 E QUARTZ ST Telephone: Fax:

MESA, AZ 85215

CONTRACTOR:

Address: Telephone: Fax:

Fees:

Group Home Registration Fee \$250.00
Technology Fee \$14.80
Duplicate Certificate of Occupancy - \$120.00

Existing building more than 12 months after

original C of O is

Total Fees: \$384.80

CONDITIONS

Building Inspections Required - Building Inspections Required

Zoning Inspection Req - Zoning Inspection Req

INSPECTION REQUESTS

To request an inspection online, log into your account and enter the permit number. Click the down arrow under 'Record Info' and click on 'Inspections'. Click 'Schedule or Request an Inspection' and select the type of inspection. Select the date, time, and click 'Continue'. Enter notes for the inspector if necessary and then click 'Finish'. Your inspection is now scheduled

REMARKS

Community Residence Registration and Certificate of Occupancy for a residential care home operating as a Behavioral Health Home. Name: Healthy Homes 365 LLC. Maximum 10 care residents, all persons capable of self-preservation. 24-hour care. R-4 Condition 2 Occupancy Group. MBC 4-2-1 Section 310.5: This occupancy condition shall include buildings in which there are any persons receiving custodial care who require limited verbal or physical assistance while responding to an emergency situation to complete

building evacuation. Automatic fire sprinklers with attic protection monitored by third party required. MBR 4-2-1 Section 310.5 No inspection required.

Record: PMT23-03490 Issued On:

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NOTICE: PERMIT AUTHORIZES CONSTRUCTION ONLY PURSUANT TO PLANS REVIEWED FOR CODE COMPLIANCE AND APPLICABLE LAWS AND ORDINANCES. PERMIT DOES NOT NEGATE APPLICABLE PRIVATE COVENANTS, CONDITIONS, AND RESTRICTIONS. CONTRACT WORK SHALL BE PERFORMED BY PROPERLY LICENSED CONTRACTORS WITH VALID MESA AND STATE PRIVILEGE SALES TAX LICENSES. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK OR CONSTRUCTION IS SUSPENDED OR ADANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

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AUTHORIZED AGENT OWNER SIGNATURE

DATE



Certificate of Occupancy Building Safety Division

said Code (International Codes) and with Title XI, of the Mesa City Code entitled "Zoning" and with the various his Certificate is issued pursuant to the requirements of the Mesa Administrative Code, Section 4-1-6 (B), which became effective February 10, 2019, certifying that on this date the structure and site listed below is in compliance with ordinances of the City regulating building construction and use insofar as ascertained by the undersigned:

Building Permit #: PMT23-03490

Owner's Name: MARK AND TICA MASON

Owner's Address: 6302 E QUARTZ ST, MESA, AZ, 85215

Project Address: 6302 E QUARTZ ST, MESA, AZ 85215

Project Name: Healthy Homes 365 LLC

OCCUPANCY:

Occupancy Group	Constr Type	Sq Ft	Occ Load
R-4 Residential Care/Assisted Living	Not	1838	10
	Total SO FT: 1838	1838	

Zoning District: RS-9 PAD

Special Stipulations/Conditions: R-4 CONDITION 2

FIRE SPRINKLERS REQUIRED

APPROVED FOR UP TO 10 RESIDENTS EXCLUDING STAFF

04/01/2024

Date:

Deputy Director/Building Official: John Sheffer

ANY ALTERATIONS OR CHANGES TO THE OCCUPANCY ABOVE SHALL VOID THIS CERTIFICATE. POST AND MAINTAIN THIS CERTIFICATE IN A CONSPICUOUS PLACE.

APPROVED

By CB at 04/01/2024 14:39:02

PMT23-03490

mesalaz	

Community Residence, Assisted Living, and Nursing and Convalescent Home Registration Application

mesa-az Convalescent H	ome Registration Application	
Fedito Name Healthy Homes 365 LLC		
Number of Residents. 10	Fire Sprinklers Installed?	
Facilità 's Address: 6302 E. Quartz St Cità .	State. Az Zip Code 85215	
Facility's Mailing Address, if different: 1343 N. 2	6th st	
City: Mesa Facility's Phone Number: 480 862 3643 Tica Mason	State: <u>A2</u> Zip Code: <u>85213</u> Facility's E-Mail: ticamason74@gmail.com	
Property Owner's Address: Tica Mason 480 862 3643 Property Owner (Print): Mark and Tica Mason Property Owner's Address: 1343 N 26th St	Operator's E-Mail: ticamason74@gmail.com	
Property Owner (Print): Mark and Tica Mason Property Owner's Address: 1343 N 26th St		
City: Mesa	State: Az Zip Code: 85213	
Property Owner's Phone Number: 602 736 7395 Property Owner's Signature: Mark Mass Mass	State: Az Zip Code: Property Owner's E-Mail: (owner authorization is required)	
The applicant has read and understands all rules and regulations of the City of Mesa; has physically inspected the site and verifies that the proposed site is in compliance with all applicable city, state and federal laws; and is responsible for the accuracy of all information provided in this application. Submittal of erroneous information, or failure to disclose any requested information may result in denial of application. Errors found after processing application may result in loss of registration, and removal of registered location from Mesa Map of Registered Community Residences.		
affirm that the information presented in support of knowledge:		
MASO A viicant's Signature	3142024 Date	



Occupancy Confirmation Worksheet

Residential Care - Non-Substance Abuse or Detox Treatment (Assisted Living Facility/Behavioral Health/

plicant Printed Name	ica Mason	- WILKOL	1 - 3.14.202
,	7. 1100	· INANA.	_
offirm that the information pre nowledge:	esented in support of this registration is	true and correct to the b	pest of my
rmes that the proposed site is curacy of all information provi quested information may resu	erstands all rules and regulations of the in compliance with all applicable city, s ided in this application. Submittal of en It in denial of application. Errors found applicant is confirming the true and corn	state and federal laws; a roneous information, or after processing applica	and is responsible for the failure to disclose any attom may result in loss of
scome to e sprinklers with atti	ic protection monitored by third party req	uired. MBR 4-2-1 Section	310.5
equire limited verbal or physical	assistance while responding to an emerge	ency situation to complete	building evacuation
self-preservation. This occupa	ncy condition shall include buildings in wh	nich there are any persons	receiving custodial care who
R-4 Condition 2; Resident	tial care home with 6 to 10 residents (per I	Mesa Zoning Ordinancel in	not including staff, all canable
ssistance, are capable of respon	iding to an emergency situation to comple	te building evacuation. M	BR 4-2-1 Section 310 5
R-4 Condition 1; This occ	upancy condition shall include buildings in	which all persons receiving	ng custodial care without any
ongregate care facilities, Group	Home, Halfway Houses, Residential board	and care facilities. Social	rehabilitations
sychiatric complications). R-4 in	cludes, but is not limited to, the following:	: Alcohol and drug center.	Assisted living facilities
eceiving care who have the abili	ity to respond to emergency situations and	evacuate at a slower rate	and/or who have mostal and
residential Group R-4 occupations of the reside on a 24-hour basis in	ancy for more than five but not more than a supervised residential environment and	1 10 persons in care (per N	MZO 11-31-14), excluding staff,
system in accordance with section	otected with automatic sprinkler systems in 907.2.10.1.3. MBR 4-2-1 Section 310.6	n accordance with section	903.3 and a smoke alarm
bersons) not capable of self-bre	servation or responding to an emergency	situation without physical	assistance from staff Such
Dersons) not canable of salf	sted living homes including facilities provid	ding directed care services	, with 5 or fewer residents, any
without pri	<u>ysical assistance</u> from staff. MBR 4-2-1 Sec	tion 310.6	
R-5 Residential care/assi	sted living facility, with 5 or fewer resident	ts, all capable of self-prese	ervation or responding to an
real care racinty K-3 occupancie	es include:		
and matthe surgie-rattilly awelli	ings (townhouses) and their accessory stru	ictures conforming with th	ne- and two-ramily dwellings
R-S. Residential Group R-5 occup	pancies where the occupants are primarily	nermanent in detached o	ing and two family dwallings
select the appropriate occupa	ncy group, per Mesa Building Code and	Mesa Fire Code: P7112	29-18036
Solort the annuaries	a Fire Code? Yes \(\times \) No \(\tau \) Incy group, per \(\text{Mesa Building Code} \) and	my river sed	orly ac
party in accordance with Mes	ped with automatic fire sprinkler protec	tion and attic protection	monitored offsite by a third
Number of Care Residents (no	10 ot including staff):		
Type of Residential Facility as	Licensed:	The state the c	
	Transitional Community	Residence	
HealthyHon Facility Name:	nes 365 LLC		ANNUAL B S
Property Address:			
6302 F C	Quartz St Mesa AZ 85215		
Part I: Certificate of Occupa	Home/Sober Living)		



Property Owner's Authorization Signature Form

www.mesaaz.gov/planning 480-644-2385

Property Owner:	Applicant:
Mark & Tica Mason	Tica Mason
Name 1343 N. 26 th 5+ Mesa Az 89 Address (Street City State Zin Code)	Name 2212
Address (Street, City, State, Zip Code) (007 738-7395	
(402 738-7395) Phone Number	480 862 3643 Phone Number
MGSON BEWC, GMALL. COM	TICANOSON 748 EMALL. COM
Mak Mason / 1000 3/20/24	F-mail 1/harby/
Signature Date	Signature Date
/	
	Registration Number (required for professional registrants)
Address of Site: 6302 E. Quetz	St APN: 141-69-319
Mcs	a AZ 85215
Select Type of Request:	
Scient Type of Request.	
☐ Administrative Review	
Minor Modifications/Changes to existing casesDesert Uplands Reviews	Historic Preservation (Certificate of Appropriateness)Medical Marijuana
 Form Based Code /Zoning Clearance Land Division (Lot Splits) 	Wireless Communication Facilities (Cell Towers)
☐ Planning & ZoningRezone	Site Plan Review/Modifications Special Use Permits
Pre-PlatsCouncil Use Permits	Minor General Plan Amendments
Development Unit Plans	
□ Board of Adjustment	
VariancesSubstantial Conformance Improvement Permit (SCIP)	 Special Use Permits Wireless Communication Facilities (Cell Towers)
Development Incentive Permit (DIP)	The loss communication and the loss (controlled)
□ Design Review	
☐ Annexation	
☐ General Plan Amendment – Major	
Community Residence [Residential Care Home]	
☐ Group Foster Care Home [DCS]	

Certification of Occupancy Application

Below please find the following information about the Community Residence requested for an application:

- The name of the facility: HealthyHomes 365 LLC
- The name, telephone number, email address and mailing address of the person responsible for the facility: Tica Mason, (480) 862 3643, <u>ticamason74@gmail.com</u>, 1343
 N 26th st Mesa AZ 85213
- · The type of Community Residence Behavioral Health Residental Facility
- The number of residents: 10
- The age range of the residents: 18 to 80 years of age.
- What Arizona State agency will be licensing this facility? Arizona Department of Health and Services.
- Indicate whether or not all residents are capable of recognizing and responding to emergency situations without assistance from staff: Yes All residents are capable of recognizing and responding to emergency situations without assistance from staff. Each resident is physically and mentally capable of evacuating themselves without direction from a staff member. Each resident will be educated on evacuation plans, route and meeting location.
 PMT23-1853 6
- Does the residence have fire sprinklers? Yes Permit#:
- Are the fire sprinklers monitored by an off-site agency? Yes, Family Fire & Security LC
- Provide a site plan of the property: Site plan of property attached below
- Provide an evacuation floor plan of the facility: Evacuation floor plan of the facility attached below





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Healthy Homes 365 LLC 6302 E Quartz St. Mesa Az 85215

SITE PLAN



Healthytomes 365 UC N Rebo -Bacham 5 Produce Prolice. 14 Tiels Kitchen OFFICE O Pathocar Eptry Bedicon 2 Lauxhy HH DOO? Bedrum 3 2 Car Garage Healthythomes 365 U.C. 6302 E. Quartz St Mcsa. Az 85215 Garage DOOR Evocuation Floor Plan

and the latest

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ARTICLES OF ORGANIZATION

OF LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: HEALTHYHOMES365 LLC

ENTITY ID: 23472458
ENTITY TYPE: Domestic LLC
EFFECTIVE DATE: 01/16/2023
CHARACTER OF BUSINESS: Apylogal purpor

CHARACTER OF BUSINESS: Any legal purpose MANAGEMENT STRUCTURE: Manager-Managed

PERIOD OF DURATION: Perpetual PROFESSIONAL SERVICES: N/A

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: LEGALCORP SOLUTIONS, LLC

PHYSICAL ADDRESS: 2 EAST CONGRESS ST SUITE 900, TUCSON, AZ 85701

MAILING ADDRESS: 2 EAST CONGRESS ST SUITE 900, TUCSON, AZ 85701

PRINCIPAL ADDRESS

1343 North 26th Street, MESA, AZ 85213

PRINCIPALS

Manager: Tica Marie Mason - 1343 North 26th Street, MESA, AZ, 85213, USA - - Date of Taking Office:

ORGANIZERS

Tica Marie Mason: 1343 North 26th Street, MESA, AZ, 85213, USA, ticamason74@gmail.com

SIGNATURES

Organizer: Tica Marie Mason - 01/16/2023