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

City of Mesa Construction Permit PMT24-07579



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

Record: PMT24-07579 Issued On: 05/14/2024

Printed On: 5/14/2024

Project Address: 11354 E COVINA ST, MESA, AZ 85207 Zoned: RS-6 PAD

Subdivision: DAVE BROWN AT MOUNTAIN & Lot: 67

UNIVERSITY

Assessor Parcel: 22011505

Census Tract: 420106 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 | VB | 2104 | |
| | Total SQ FT : | 2104 | |

OWNER: Jefferson Olson

Address: 368 East Joseph Way Telephone: Fax:

Gilbert, AZ 85295

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

Desert Uplands - Planning Approval Required.

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

R-4 OCCUPANCY GROUP CONDITION 1. Community Residence Registration Application and Certificate of Occupancy for a residential care home operating as a Residential Behavioral Health Care Home. Name: Restored Hope Recovery. Applicant requested 10 number of residents. MZO allows up to 10 residents, excluding staff. No skilled nursing services. 24-hour care. R-4 Occupancy Group Condition 1. MBC 310.5: This occupancy condition shall include buildings in which all persons receiving custodial care, without any assistance, are capable of responding to an emergency situation to complete building evacuation. No automatic fire sprinklers required. VB Construction. No construction work under this permit. No inspection required.

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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.

Х

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 #: PMT24-07579

Owner's Name: Jefferson Olson

Owner's Address: 368 East Joseph Way, Gilbert, AZ, 85295

Project Address: 11354 E COVINA ST, MESA, AZ 85207

Project Name: RESTORED HOPE RECOVERY

OCCUPANCY:

| Occupancy Group | Constr Type | Sq Ft | Occ Load |
|--------------------------------------|---------------|-------|----------|
| R-4 Residential Care/Assisted Living | VB | 2104 | |
| | Total SQ FT : | 2104 | |

Zoning District: RS-6 PAD

Special Stipulations/Conditions: R-4 Condition 1

No Fire Sprinklers Required Approved for Up To 10 Residents Excluding Staff 05/14/2024

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.



By PW at 05/07/2024 10:31:52

Occupancy Confirmation Worksheet

mesa az

Residential Care - Non-Treatment (Assisted Living Facility/Behavioral Health/Foster/Group/Sober Living)

| Property Address: 11354 E. Covina Street | Mesa, AZ 85207 | |
|--|--|--|
| Facility Name: Restored Hope Recovery | | |
| Type of residential care Facility as licensed: | Behavioral Health Home | • |
| Number of Care Residents (not including sta | ff): 10 🔻 | |
| Is the home equipped with automatic fire sp accordance with Mesa Fire Code? Yes* | | ion monitored off site by a third party in rent Third Party Fire Inspection Report. |
| Select the appropriate occupancy group, per R-5, Residential Group R-5 occupancies when dwellings and multiple single-family dwelling Residential Code. 24-hour care facility R-5 occupancies of R-5 Residential care/assisted living far an emergency situation without physical assion R-5 Residential care/assisted living horesidents, any (persons) not capable of self-pfrom staff. Such assisted living homes shall brand a smoke alarm system in accordance with R-4 Residential Group R-4 occupancy for mostaff, who reside on a 24-hour basis in a superincludes persons receiving care who have the who have mental and psychiatric complication Assisted living facilities, Congregate care facilities, Congregate care facilitations. | te the occupants are primarily perma is (townhouses) and their accessory sucupancies include: cility, with 5 or fewer residents, all castance from staff. MBR 4-2-1 Section omes including facilities providing directly of the protected with automatic sprinkler in section 907.2.10.1.3. MBR 4-2-1 Section 907.2.10.1.3. MB | nent in detached one- and two-family structures conforming with the Mesa apable of self-preservation or responding to a 310.6 ected care services, with 5 or fewer ergency situation without physical assistance systems in accordance with section 903.3 ection 310.6 ersons in care (per MZO 11-31-14), excluding receive custodial care (custodial care autions and evacuate at a slower rate and/or o, the following: Alcohol and drug center, |
| R-4 Condition 1; This occupancy cond any assistance, are capable of responding to 310.5 | | all persons receiving custodial care, without building evacuation. MBR 4-2-1 Section |
| | condition shall include buildings in v physical assistance while responding | to an emergency situation to complete |
| The applicant has read and understands all reverifies that the proposed site is in compliant accuracy of all information provided in this a requested information may result in denial a local jurisdiction approval. The applicant is c | ce with all applicable city, state and application. Submittal of erroneous in application. Errors found after proconfirming the true and correct occup | federal laws; and is responsible for the nformation, or failure to disclose any cessing application may result in loss of pancy for this facility. |
| I affirm that the information presented in su knowledge: | pport of this registration is true and | correct to the best of my |
| Jefferson Olson | Jellessa Chan | 4-17-2024 |
| Applicant Printed Name | Applicant Signature | Date |



Property Owner's Authorization Signature Form

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

| Prope | rty Owner: | Applicant: | |
|-----------------|--|---|--|
| Jefferson Olson | | Jefferson Olson | |
| Name | Character Communication College | Name | |
| _ | E. Covina Street Mesa AZ 85207 | 368 East Joseph Way Gilbert AZ 85295 | |
| W STATE AND | (Street, City, State, Zip Code) 6-0266 | Address (Street, City, State, Zip Code) 602-616-0266 | |
| Phone No | umber | Phone Number | |
| N/A Fax Num | No. | N/A Fax Number | |
| | a_hiking@yahoo.com | sedona_hiking@yahoo.com | |
| Signature | ess of Site: 11354 E. Covina Street Gilbert AZ 852 | Signature Date Registration Number (required for professional registrants) | |
| Select | t Type of Request: | | |
| | Administrative Review | | |
| | Minor Modifications/Changes to existing cases Desert Uplands Reviews Form Based Code /Zoning Clearance Land Division (Lot Splits) | Historic Preservation (Certificate of Appropriateness) Medical Marijuana Wireless Communication Facilities (Cell Towers) | |
| | Planning & Zoning | | |
| | Rezone Pre-Plats Council Use Permits Development Unit Plans | Site Plan Review/Modifications Special Use Permits Minor General Plan Amendments | |
| | Board of Adjustment | | |
| | Variances Substantial Conformance Improvement Permit (SCIP) Development Incentive Permit (DIP) | Special Use Permits Wireless Communication Facilities (Cell Towers) | |
| | Design Review | R-4 OCCUPANCY GROUP CONDITION 1. Community Residence | |
| | Annexation | Registration Application and Certificate of Occupancy for a residential care home operating as a Residential Behavioral Health | |
| | General Plan Amendment – Major | Care Home. Name: Restored Hope Recovery. Applicant requested 10 number of residents. MZO allows up to 10 residents, excluding | |
| Ø | Community Residence [Residential Care Home] | staff. No skilled nursing services. 24-hour care. R-4 Occupancy Group Condition 1. MBC 310.5: This occupancy condition shall include buildings in which all persons receiving custodial care, | |
| | Group Foster Care Home [DCS] | without any assistance, are capable of responding to an emergency situation to complete building evacuation. No automatic fire sprinklers | |

No inspection required.



required. VB Construction. No construction work under this permit.

APPROVED

By - CB at 05/08/2024 17:18:25

| | ce, Assisted Living, and Nursing and Home Registration Application |
|---|--|
| Facility Name: Restored Hope Recovery | |
| Number of Residents: 10 | Fire Sprinklers Installed? |
| Facility's Address: 11354 E. Covina Street City: Mesa | State: AZ Zip Code: 85207 |
| Facility's Mailing Address, if different: 368 East Jo City: Gilbert | seph Way State: AZ Zip Code: 85295 |
| Facility's Phone Number: Facility's Operator: Jefferson Olson | Facility's E-Mail: |
| Operator's Phone Number: 602-616-0266 Property Owner (Print): Jefferson Olson | Operator's E-Mail: sedona_hiking@yahoo.com |
| Property Owner's Address: 368 East Joseph W City: Gilbert | ay State: AZ Zip Code: 85295 |
| Property Owner's Phone Number: 602-616-0266 Property Owner's Signature: | Property Owner's E-Mail: sedona_hiking@yahoo.com [owner authorization is required] |
| The applicant has read and understands all rules and the site and verifies that the proposed site is in complice responsible for the accuracy of all information provide or failure to disclose any requested information may reapplication may result in loss of registration, and reaccommunity Residences. | I regulations of the City of Mesa; has physically inspected fance with all applicable city, state and federal laws; and is sed in this application. Submittal of erroneous information, esult in denial of application. Errors found after processing moval of registered location from Mesa Map of Registered of this registration is true and correct to the best of my Date |

Located in the RS-6-PAD district and meets 1,200 foot separation requirement.



Restored Hope Recovery is a Behavioral Health Home located at 11354 E. Covina Street Mesa, AZ 85207. Restored Hope Recovery is a R4 Condition 1 Behavioral Health Home where we will provide a residence for addiction and behavioral health recovery under direct full-time supervision 24/7 by Behavioral Health Techs or Nurses. The staff will prepare meals and ensure the house is kept clean and a positive healthy environment with activities such as swimming/exercise activity onsite, reading/board games, AA/NA counseling onsite, Group counseling, teaching of life skills and ensuring services and care plans are adhered to and completed. Nurses will administer prescribed medication as ordered by the Physician. The residents will all be capable of self-preservation should there be an emergency and will receive counseling services, mentorship, learn life skills, transported to Physician appointments, receive prescribed medications and live short term as allowed by insurance and their plan of care to obtain the skills necessary to live on their own again.

Restored Hope Recovery will obtain licensure from the Department of Health Services. The residents will all be male between the age of 18 and 65 years old with attention to ensure the residents are physically capable of self-preservation and don't require physical help for mobility or self-cares. There will be environmental safety plans in place such as fire evacuation drills and plan posted, locked/secured pool fence when not in use and supervised by the staff.

Responsible Person for the Home information:

Jefferson Olson

Phone: 602-616-0266

Address: 368 East Joseph Way Gilbert, AZ 85295

Email: sedona_hiking@yahoo.com



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PMT24-07579 CamScanner



