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

Construction Permit

PMT21-11901

City of Mesa



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

PMT21-11901 Issued On: 08/12/2021 Record:

Printed On: 8/12/2021

1320 N VINCENT, MESA, AZ 85207 Zoned: RS-9 PAD Project Address:

SAGUARO MOUNTAIN Subdivision: Lot: 79

Assessor Parcel: 22001203 420106 Census Tract: 041000 Sales Tax Code:

Non-Structural Classification: Units: Buildings:

\$0.00 Valuation:

Occ Grp	Const Type	SqFt	Occ Load
R-4 Residential Care/Assisted Living	VB	2860	10
	Total SQ FT :	2860	

OWNER: PLAY FOR LIFE LLC

Address: 1820 N SHELBY Fax: Telephone:

MESA, AZ 85207

CONTRACTOR:

Address: Telephone: Fax:

Fees:

Duplicate Certificate of Occupancy -\$120.00

Existing building more than 12 months after

original C of O is

Group Home Registration Fee

Technology Fee

\$250.00 \$14.80

Total Fees:

\$384.80

CONDITIONS

Desert Uplands - Planning Approval Required.

Building Inspections Required - Building Inspections Required

Fire Inspection Req - Fire Inspection Req

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

Group home is for 10 residents all capable of self-preservation and responding to emergency situations without assistance from staff. This certification of occupancy is void if any of the residents become incapable of self-preservation and responding to emergency situations. HOME IS EQUIPPED WITH AN AUTOMATIC FIRE SPRINKLER SYSTEM.

Record: PMT21-11901 Issued On: 08/12/2021

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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.

X

AUTHORIZED AGENT OWNER SIGNATURE

DATE



Certificate of Occupancy Building Safety Division

This Certificate is issued pursuant to the requirements of the Mesa Administrative Code, Section 4-1-6 (B), which became International Codes) and with Title XI, of the Mesa City Code entitled "Zoning" and with the various ordinances of the City effective February 10, 2019, certifying that on this date the structure and site listed below is in compliance with said Code (2018 regulating building construction and use insofar as ascertained by the undersigned:

Building Permit Number: PMT21-11901

Owner's Name: PLAY FOR LIFE LLC

Owner's Address: 1820 N SHELBY, MESA, AZ, 85207

Project Address: 1320 N VINCENT, MESA, AZ 85207

RMBHS Vincent House

Project Name: OCCUPANCY:

Occ Grp	Const Type	SqFt	Occ Load	
R-4 Residential Care/Assisted Living	NB NB	2860	10	
	Total SQ FT :	2860		

Zoning District:

RS-9 PAD

Conditions/Restrictions: Group

Group home is for 10 residents all capable of self-preservation and responding to emergency situations without self-preservation and responding to emergency situations. HOME IS EQUIPPED WITH AN AUTOMATIC FIRE assistance from staff. This certification of occupancy is void if any of the residents become incapable of SPRINKLER SYSTEM.

Deputy Director/Building Official:

Date: 08/12/2021

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



mesa az Group Home Registration

Facility Address: 1320 W. Vince	<u>Mesa, AZ 85</u>
Facility Name: PMBHS Vince	M+ HOUSENo. of Licensed Beds:_10
Applicant/Operator: Fedmount	an Behavioral Helth Services LLC
	seline rd. Stell5 Phone: 480-641-9552
City, State, Zip: Silbert, AZ	85234cell:_704-942-1646_
Email Address: 50 mm r 0 rn	
	LCPhone:_704_942-1646_
	City, State, Zip: Mesa, 42.85207
Property Owner's Signature:	
Licensing Agency: ADHS	☐ ADES ☐ City of Mesa ☐ Other
Type of License: Behavioral H	eath Residential Facility
ADHS Licenses: — Personal Care	☐ Supervisory Care ☐ Directed Care X Respite Care
Residents will be:	f-Preservation
	ON PROVIDED ON THIS FORM IS TRUE AND CORRECT.
Applicant's Signature:	Date:6/30/21
Application Approved By: Solution Application Exception Exception Application Exception Application Exception Exception Application Exception Excepti	2) oznago utono um, our oo, zozi
OFFICIAL Abblication Approved By:	Solita Carryl Date :7/28/21
# Fire Inspection email from Kevir	Condition 1, a fire inspection is not required per Fire Prevention. See Bush, Assistant Fire Marshall and applicant's signed "Declaration of ation Ability" form in Attachements.
	APPROVED
*Registration Approved By:	By CBridge at 2:05 pm, Aug 11, 2021 The Inspection has been successfully completed and the Building Official signs off.)
*Provide a copy of the license for the residence issue	d by the State of Arizona to City of Mesa Planning Staff to complete the registration process.

PMT21-11901



Group Home Worksheet

Development Services Department 55 North Center Street Mesa, AZ 85211-1466 480-644-4273 Date (0/29/202)

Name of Group Home:	RMBH5 Vincen	+ House	-
Address of Group Home :	1320 N. Vincen	+ Mesa AZ	
How many Licensed Beds?	10	How many bathro	oms? 3
Describe the residents:	Behavioral Hen	Ith	
Describe the care provided :	Peopite Care		
Are all residents capable of self	preservation?	Yes	No
Do the residents reside for 24 h	ours?	Yes	No
Does the house have fire sprink	lers?	Yes	No
Do the fire sprinklers report to	an off-site location?	Yes	No
Will the fire sprinklers activate	the smoke alarms?	Yes	No
Is there a smoke detector in every garage, bathroom, laundry room			
room?		Yes	No
Does the house have Fire Exting	guishers?	Yes	No
Is there a 36" wide front door a	nd back door?	Yes	No
Is there a ramp and 1/2" thresh	old?	Yes	No
Do the exit doors & ADA bath d	oor have lever hardware?	Yes	No
Is there a ADA bath with a 60" of	lia. clear space?	Yes	No
Is there a roll-in shower?		Yes	No
Is there grab bars at the toilet a	nd shower?	Yes	No
Is there clear knee space at the	bathroom sink?	Yes	No
Is there a lever faucet at the ba	throom sink?	Yes	No
Other than finishes, furniture and Not out this t		o to improve the hou	ise?
If the home has 6-10 residents and	any resident becomes incapable,	this worksheet and	
the Certificate of Occupancy becon	The same of the sa		
If the home has 1-5 capable resider	The second second	apable, this will	
require the home to be sprinklered	1.0		
See the IBC 308.2, 308.3 and the M	esa amendments 310.1 and 903.	2.2 as reference.	

Date

I hereby attest to the accuracy of this information and understand the instructions

Signature Print name PMT21-11901

REVIEWED

By CBridge at 8:43 am, Jul 08, 2021

June 29, 2021

To:

City of Mesa, Building Safety

From: Sarah Ruane, RMBHS

RE:

Narrative for Certificate of Occupancy Request (1320 n. Vincent)

The facility RMBHS Vincent House, 1320 n. Vincent will provide short term respite care services for 10 children between the ages of 5 and 17. This property will be used for the temporary care of children, not related to the staff, we will not take custody of any children. Our program provides short term respite to help alleviate stress in these children's homes and families. The state of Arizona defines "respite care" as its own services type that is designed to be short-term and ensure the well-being of the family. By providing a time of rest and relief for the family/caregiver while engaging the child in meaningful activities this can be inside the child's home or outside it. Our agency chooses to provide this service outside the home in this facility. Our clients do not have any physical handicaps, but are behavioral health clients. The level of care we provide is only respite services. The Arizona Department of Health licenses us as a Behavioral Health Residential Facility, and the only service that we provide under that licensure type are respite services. We do not provide services for clients who are addicted to any substances, they must be sober before they come into our program. Our clients are capable of recognizing and responding to emergency situations without assistance from staff. There will be no skilled nursing available in our facilities. This facility is owned by Play for Life LLC please see the attached documentation for proof of ability to sign on behalf of the LLC's involved in the property.

The facility maintains a current Fire Safety Operational Permit, fire extinguisher(s) are serviced annually along with a sprinkler system, operational smoke detectors, and fire evacuation plans for each floor of the house. No facility is greater than two stories and the facility will maintain a maximum of 10 beds available for the clients. There will be no signage posted on or around the facility and no extra vehicle traffic as transportation is provided for the clients by our staff. There is a 6-foot-high wall between the outdoor play area and adjacent neighbors.

Please feel free to contact me for further information at Sarahr@rmbhs.com, or 704-942-1646.

Sincerely,

Sarah Ruane

Chief Executive Officer Office: 480-641-9552

Sarahr@rmbhs.com

PMT21-11901

June 30, 2021

To: City of Mesa, Building Safety From: Sarah Ruane, RMBHS

Re: Letter for ownership of (1320 N. Vincent)

This letter is to confirm that Sarah Ruane is in fact the same person as Sarah Kinsel and she is the managing member of Play for Life LLC. Feel free to contact me directly if you have any further questions.

Thank you!

Sarah Ruane Signature

Acknowledged before me

this date

County

Notary Signature

State

Commission Expires

This instrument may be recorded at the request of:

Kent Phelps, Attorney 3303 E. Baseline Rd., #101 Gilbert, AZ 85234

The recording official is directed to return this instrument or a copy to the above person.

Space Reserved for Recording Information.

RESOLUTION & CERTIFICATE OF POWER AND AUTHORITY OF LIMITED LIABILITY COMPANY

LIMITED LIABILITY COMPANY:

RED MOUNTAIN BEHAVIORAL HEALTH SERVICES, LLC

(U.S. Tax ID No. 65-1245699)

MEETING:

Members Meeting Held on April 21, 2021

The undersigned manager and members of the Limited Liability Company ("LLC") hereby certify that the following resolutions are a summary of certain resolutions adopted at the above-described meeting of the LLC. These resolutions in their original form were agreed to at the above-described meeting of the LLC, are in full force and effect, and have not been revoked or substantially modified.

e e s

- 1. <u>Principal Place of Business</u>. The principal place of business of the LLC is located at 2915 E. Baseline Rd., #115, Gilbert, AZ 85234.
- 2. <u>LLC Documents, Files, and Records</u>. The official LLC documents are on file with the Arizona Corporation Commission. The official LLC files and records are located at the LLC's principal place of business.
- 3. <u>Members and Manager of the LLC</u>. The name and address of the manager of the LLC is THREE IN ONE MANAGEMENT, LLC, 2915 E. Baseline Rd., #115, Gilbert, AZ 85234. The name and address of the members are:
 - CONTANGO TRUST, dated March 9, 2012, Randy Kinsel, managing trustee
 2915 E. Baseline Rd., #115
 Gilbert, AZ 85234

- 3.b. BRAMASOLE TRUST, dated March 9, 2012, Robin Kinsel, managing trustee 2915 E. Baseline Rd., #115 Gilbert, AZ 85234
- 3.c. MEAD LEGACY TRUST, dated June 1, 2010, Sarah E. Ruane, managing trustee

2915 E. Baseline Rd., #115 Gilbert, AZ 85234

- 3.d. THE ELE TRUST, dated July 1, 2019, Sarah E. Ruane, managing trustee 2915 E. Baseline Rd., #115 Gilbert, AZ 85234
- 3.e. ALOHA ANANDA TRUST, dated July 1, 2019, Christopher M. Kinsel, managing trustee
 2915 E. Baseline Rd., #115
 Gilbert, AZ 85234
- 4. <u>Execution of Legal Documents</u>. Execution of legal documents for the LLC was discussed, after which, on motion duly made, seconded, and unanimously passed, it was

RESOLVED: The following persons are authorized to execute all legal documents for and on behalf of the LLC, including but not limited to provider contracts and other provider documents; government contracts and other government documents; leases; mortgages; agreements; contracts; promissory notes; bills of sale; chattel mortgages; satisfactions and assignments of mortgages, liens, and encumbrances of all kinds; claims for liens; lien waivers; and transfers and assignments of real, personal, and mixed property, all of which may be necessary and proper in the conduct of the LLC:

RANDY KINSEL or ROBIN KINSEL or SARAH E. RUANE or CHRISTOPHER M. KINSEL

Notwithstanding the above, only RANDY KINSEL or ROBIN KINSEL are authorized to execute a contract for the sale of the LLC.

5. **Financial Depository and Signators on Accounts**. The matter of the designation of the official depository of the LLC was discussed, and upon motion duly made, seconded, and unanimously passed, it was

RESOLVED: For a checking, savings, money market, investment or other corporate account, any bank or securities company may be selected as depository for the funds of the LLC. The members and manager hereby ratify and approve the certificate of resolution form required by the bank or securities company with respect to the withdrawal of funds and the execution of same by the members and incorporate the terms of that certificate of resolution by reference; and it was

FURTHER RESOLVED: The following persons are authorized to open, close, sign checks on, make withdrawals from and otherwise exercise authority over the LLC's accounts:

RANDY KINSEL or ROBIN KINSEL or SARAH E. RUANE or CHRISTOPHER M. KINSEL

Professional Advisors. The attorney for the LLC is KENT PHELPS, 3303 E. Baseline Rd., #101, Gilbert, AZ 85234; telephone (480) 771-0707.

Any person dealing with this document may contact the attorney for the LLC for a written confirmation that it has not been superceded.

Reproductions of this executed original (with reproduced signatures) shall be deemed to be original counterparts of this Certificate of Power and Authority.

IN WITNESS WHEREOF, the undersigned execute this document to be effective as of the date of the above-entitled meeting.

MANAGER:

THREE IN ONE MANAGEMENT, LLC	DATED: 5/17/202/
RANDY KINSEL, Co-Trustee of The	DALLE.
Robin and Randy Kinsel Family Trust,	
dated June 1, 2010, its Manager	
Robin Kirsel	DATED: 5-17-21
ROBIN KINSEL, Co-Trustee of The	
Robin and Randy Kinsel Family Trust,	
dated June 1, 2010, its Manager	
MEMBERS:	

CONTANGO TRUST, dated March 9, 2012	
Menaber / / /	
DATED: 5/17/2021	
RANDY KIMSEL, Managing Trustee	

BRAMASOLE TRUST, dated March 9, 2012
ROBIN KINSEL, Managing Trustee
MEAD LEGACY TRUST, dated June 1, 2010 Member DATED: 5-17-21 SARAH E. RUANE, Managing Trustee
THE ELE TRUST, dated July 1, 2019 Member DATED: 5-17-31 SARAH E. RUANE, Managing Trustee
Member DATED: 5 17 - Z/ CHRISTOPHER M. KINSEL, Managing Trustee
STATE OF ARIZONA)) ss. COUNTY OF MARICOPA) This instrument was acknowledged before me on
Notary Public My commission expires: 6/14/33

