

DECLARATION OF RICHARD C. MILLER

STATE OF ARIZONA)
) ss.
County of Maricopa)

I, RICHARD C. MILLER, declare as follows:

1. I am over 18 years of age and have personal knowledge of the facts contained in this Declaration. If called upon to testify, I could and would testify competently as to the truth of the facts stated herein.

2. I am a member of Legacy Recovery Center, LLC, an Arizona limited liability company (“**Legacy**”).

3. I have substantial experience operating state-licensed sober living homes and behavioral health residential facilities serving the disabled population of individuals recovering from alcoholism and substance use since 2008.

4. Legacy has Joint Commission accreditation and certification and complies with the highest national standards for safety and quality in behavioral health.

5. Dr. Ehab S. Abdallah and Dr. Roland Segal are also members of Legacy Recovery Center, LLC. Together, Legacy, Dr. Abdallah and Dr. Segal are the applicants in City of Mesa Board of Adjustment Case No. BOA25-00384 (the “**Applicant**”).

6. I am submitting this Declaration in support of the Applicant’s appeal of the April 15, 2025 Zoning Administrator’s Interpretation to the City of Mesa Board of Adjustment (the “**Appeal**”). The Appeal challenges the Zoning Administrator’s April 15th interpretation regarding the residential property located at 2338 E. Minton Street, Mesa, Arizona 85213 (the “**Property**”), and requests that the Board of Adjustment grant the appeal and uphold the original family community residence approval granted for the Property on or about February 5, 2025.

7. The Property is comprised of approximately 0.48 acres within the RS-15 residential zoning district and has been developed with a large home offering 5 bedrooms and approximately 5,194 s.f. of livable space. *See* aerial photographs and photographs depicting the Property attached hereto and incorporated herein as **Exhibits A and B**, respectively.

8. On or about November 15, 2024, Dr. Ehab S. Abdallah and Dr. Roland Segal purchased the Property for \$1,744,000.00 for purposes of establishing a community residence for 10 disabled individuals. *See* Warranty Deed and Affidavit of Property Value attached hereto and incorporated herein as **Exhibit C**.

9. The disabled residents are all sober and receive counseling and treatment services to support their recovery from alcohol, substance abuse disorders and mental health disorders, such as depression, anxiety, and post-traumatic stress disorder.

10. The disabled residents who live at the Property emulate a conventional family setting.

11. The residents are responsible for daily tasks such as cleaning, personal hygiene, budgeting, and cooking.

12. The household functions as the equivalent of a family and allows the recovering persons to provide one another with continual mutual support as well as mutual monitoring to prevent relapse.

13. The potential recovery of people who are handicapped or disabled by reason of alcoholism, drug abuse, or co-occurring mental health disorders is greatly enhanced by the mutual support and monitoring provided by living with other recovering persons.

14. The quality and nature of the relationship among the residents is akin to that of a family. The emotional and peer support and bonding experienced by each resident enhances and

promotes recovery from drug addiction and alcoholism and is the equivalent of the type of love and support received in a traditional family.

15. Residents at the property are allowed to engage in the process of recovery at their own pace, and the effects of their disabilities and diseases are greatly ameliorated as a result.

16. The residents live at the Property by choice. The choice is usually motivated by the individual's desire not to relapse into drug and/or alcohol use and/or their desire for improved mental health. It is also motivated by the desire to change their lifestyle and the manner in which they conduct their affairs. There is also a desire to become a responsible, productive member of society.

17. Due in part to the opioid crisis in the State of Arizona and nationwide, the need for licensed behavioral health residential facilities has increased in recent years.

18. On or about February 5, 2025, the Property was approved by the City of Mesa as a family community residence. *See* **Exhibit D** attached hereto and incorporated herein.

19. On February 6, 2025, Legacy received from the City of Mesa an updated Certificate of Occupancy for the Property for R-4 Residential Care for up to 10 residents excluding staff. *See* **Exhibit E** attached hereto and incorporated herein.

20. In early-to-mid March 2025, Legacy began hiring the necessary staff for a behavioral health residential facility at the Property.

21. On March 27, 2025, Legacy received a behavioral health residential facility (BHRF) license approval from the Arizona Department of Health Services for the Property. The BHRF license allows up to 10 residents excluding staff. *See* **Exhibit F** attached hereto and incorporated herein.

22. On or about March 27, 2025, Legacy began accepting residents to live at the Property.

23. On or about April 2, 2025, Legacy received Joint Commission accreditation approval for the Property. *See* **Exhibit G** attached hereto and incorporated herein.

24. At all relevant times, I have disclosed to the City of Mesa that there is no maximum or minimum length of stay for residents living at the Property. I also provided an example to the City demonstrating that lengths of stay vary and are particular to the resident: I stated that some residents could choose to live at the Property for 3 to 6 months, while others may choose to live there for longer than a year. This is also an accurate example.

25. Legacy expended approximately \$500,000.00 in consultant fees, licensing, permits, contractor fees, and improvements to the Property in reliance on the City of Mesa community residence approval issued on or about February 5, 2025.

26. Legacy has a good neighbor policy in full force and effect. *See* **Exhibit H** attached hereto and incorporated herein.

27. Since opening the behavioral health residential facility at the Property in March 2025, Legacy and its residents and staff have not received a complaint or a notice of violation from the City of Mesa relating to any nuisances, noise complaints or safety concerns arising from the use of its Property.

28. Since opening the home in March 2025, Legacy, its residents and staff have not contributed to crime in the area in which the Property is located.

29. Since opening the home in March 2025, Legacy has held a large community meeting to answer the questions of neighbors and to provide contact information for future questions or concerns. *See* **Exhibit I** attached hereto and incorporated herein.

30. Since holding the community meeting, Legacy has not received any direct complaints from neighbors but has received emails, visits, and thoughtful baked goods from supportive neighbors.

31. In April 2025, a resident of the Property informed Legacy that he received a complaint from a neighbor. The neighbor had expressed an issue regarding residents smoking in the Property's outdoor designated smoking area in the backyard. Legacy communicated directly with the neighbor and attempted to mitigate this issue by moving the smoking area location further away from the neighbor's joint wall.

32. Since opening the home in March 2025, Legacy has been in consistent communication with a representative of the nearby school to discuss policies and procedures and potential modifications to the outdoor environment of the home. As a result of those communications, Legacy spent approximately \$10,000.00 to install additional trees along the rear yard wall. Legacy also donated \$1,000.00 to the school carnival this year. Legacy has received no complaints or concerns from school representatives and has appreciated the professional and communicative relationship thus far.

I declare under penalty of perjury that the foregoing statements are true and correct to the best of my knowledge.

Dated this 21st day of July, 2025.



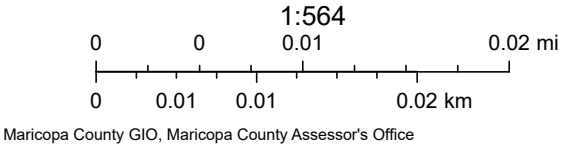
Richard C. Miller

EXHIBIT A

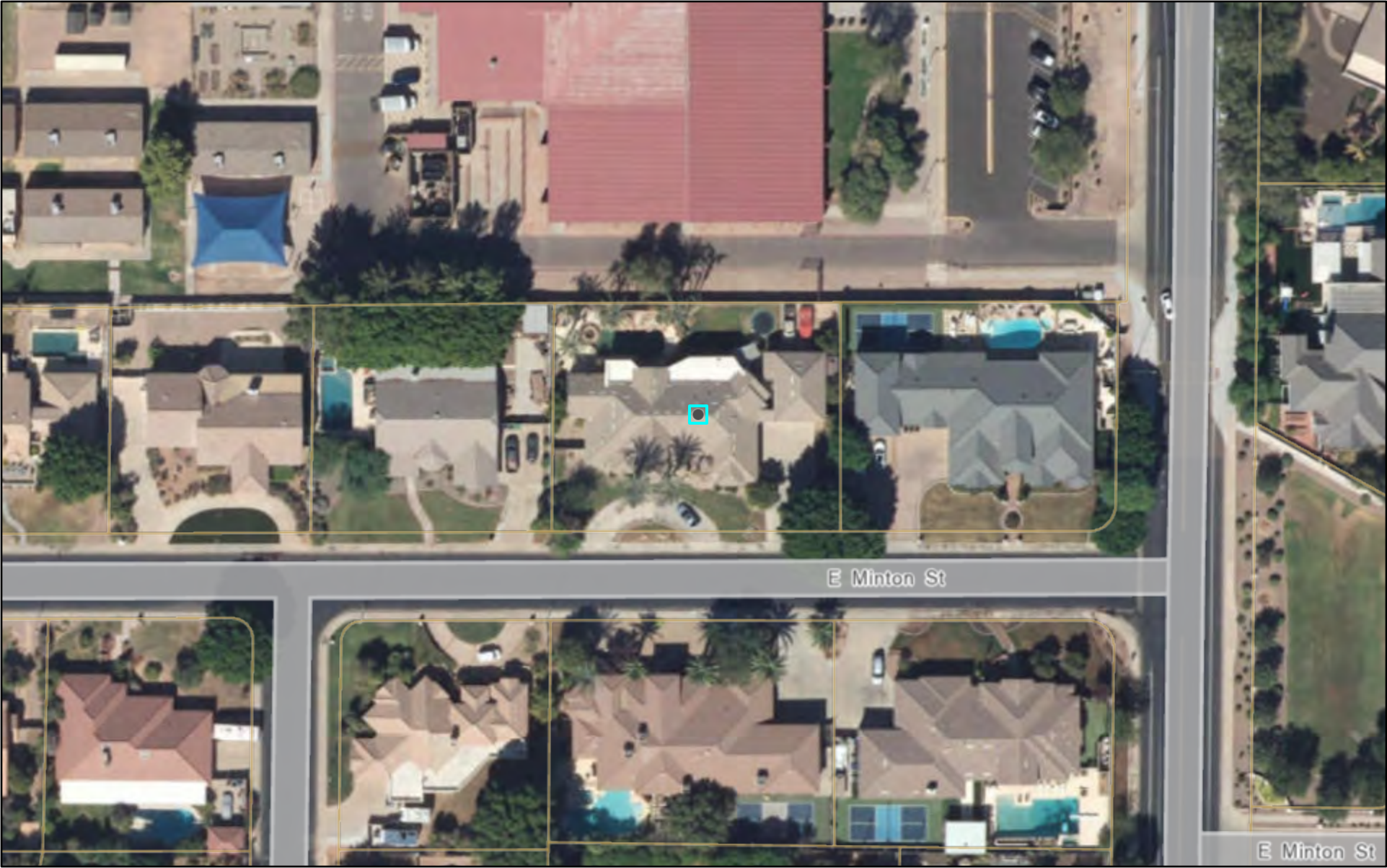
2338 E Minton St - 2025 Aerial



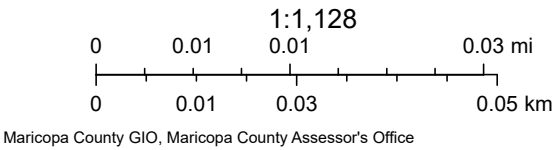
July 22, 2025



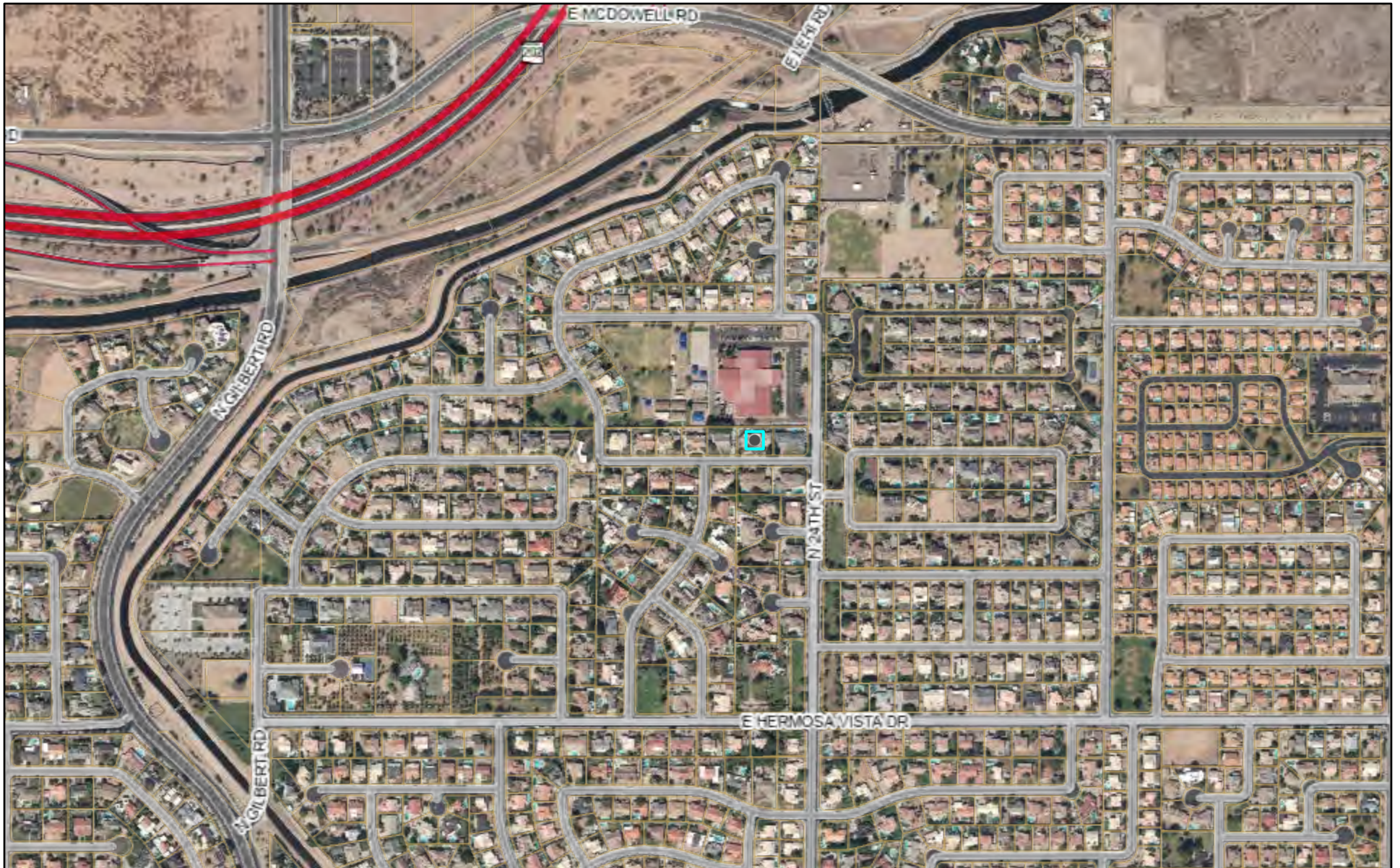
2338 E Minton St - 2025 Aerial



July 22, 2025



2025 Aerial of N Gilbert Road & 202 Area



July 22, 2025

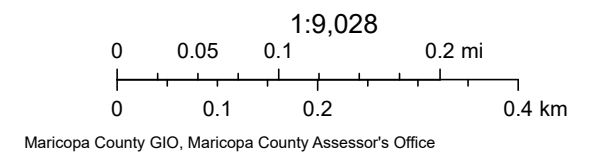


EXHIBIT B



PUBLIC NOTICE
Board of Adjustment Hearing
Hearing Date: July 29, 2025
Time: 5:00 pm
Place: Mesa City Council Chambers, Upper Level
67 East Main Street

BOA25-00384 "Appeal of Interpretation",
Consider an Appeal of the Zoning
Administrator's April 15, 2025
interpretation that the proposed
Community Residence at 2338 East
Milton Street is a "Transitional
Community Residence" and not a "Family
Community Residence," as defined in the
City of Mesa Zoning Ordinance (District 1)

The Hearing is open to the public. All interested parties should arrive at least 15 minutes before the hearing. The hearing will be held in the City of Mesa City Council Chambers, Upper Level, 67 East Main Street, Mesa, Arizona 85201. For more information, please contact the City of Mesa Planning Department at (480) 944-2200.

























EXHIBIT C

247764200-3-5-1--
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Recording Requested by:
First American Title Insurance Company

When recorded mail to:
Ehab Abdallah
10840 E Scopa TRL
Scottsdale, AZ 85262

WARRANTY DEED

Escrow No. 203-6329560 (HE)

For the consideration of TEN AND NO/100 DOLLARS, and other valuable considerations, I or we,

Franchini LLC, an Arizona limited liability company, the GRANTOR does hereby convey to

Roland Segal, a married man and Ehab Abdallah, a married man, the GRANTEE

The following described real property situate in Maricopa County, Arizona with the title being conveyed to the grantee as set forth in the attached acceptance by the grantee:

Lot 13, of HERMOSA VISTAS, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 455 of Maps, Page 17 and Certificate of Correction recorded as 99-0986326 and Affidavit of change recorded as 2001-0791571, both of official records.

Subject To: Existing taxes, assessments, covenants, conditions, restrictions, rights of way, easements and all other matters of record.

And the GRANTOR does warrant the title against all persons whomsoever, subject to the matters set forth above.

File No.: 203-6329560 (HE)
A.P.N.: 141-06-237 0

Warranty Deed - continued

DATED: September 17, 2024

SEE ACCEPTANCE ATTACHED HERETO
AND BY REFERENCE MADE A PART HEREOF.

Franchini LLC, an Arizona limited liability company

By: Berenice Franchini
Name: Berenice Franchini
Title: Member

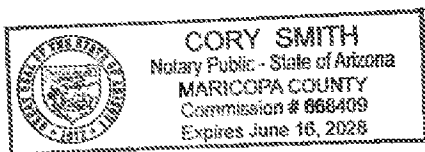
STATE OF AZ)
County of Maricopa) ss.

On Nov 14 2024, before me, the undersigned Notary Public, personally appeared Berenice Franchini, the Member of Franchini LLC, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument is/are the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

My Commission Expires: 6-16-2028

[Signature]
Notary Public



File No.: 203-6329560 (HE)
A.P.N.: 141-06-237 0

Warranty Deed - continued


ACCEPTANCE OF JOINT TENANCY

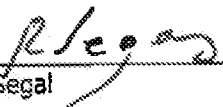
This Acceptance is to be attached to: Warranty Deed dated September 17, 2024 by and between **Franchini LLC, an Arizona limited liability company** and **Roland Segal, a married man and Ehab Abdallah, a married man;**

That each of the undersigned individually and jointly as such Grantees hereby declare that it is their intention to accept such conveyance as joint tenants with right of survivorship and not as a community property estate and not as tenants in common, and to acquire any interest in said real property under said deed as joint tenants with right of survivorship, and not as a community property estate and not as tenants in common.

That by the execution and delivery to the Escrow Agent of this "Acceptance of Joint Tenancy" the undersigned intend to evidence their acceptance of said deed as joint tenants, and hereby direct and authorize the Escrow Agent to attach this "Acceptance of Joint Tenancy" to such deed upon its execution and delivery and to record this "Acceptance of Joint Tenancy" together with such deed.

Date: September 17, 2024


Ehab Abdallah

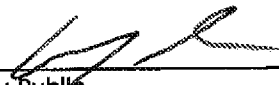

Roland Segal

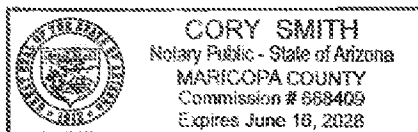
STATE OF AZ)
County of Maricopa)ss.

On Nov 13 2024, before me, the undersigned Notary Public, personally appeared **Ehab Abdallah and Roland Segal**, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument is/are the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

My Commission Expires: 6-16-2028


Notary Public



STEPHEN RICHER

20240613133 11/15/2024 11:15

ELECTRONIC RECORDING

SALES AFFIDAVIT

247764200-4-5-2-Y-
amine

AFFIDAVIT OF PROPERTY VALUE

1. ASSESSOR'S PARCEL IDENTIFICATION NUMBER(S)

Primary Parcel: 141-06-237 0 - BOOK MAP PARCEL SPLIT

Does this sale include any parcels that are being split / divided?

Check one: Yes ☐ No ☒

How many parcels, other than the Primary Parcel, are included in this sale? _____

Please list the additional parcels below (attach list if necessary):

(1) _____ (3) _____
(2) _____ (4) _____

2. SELLER'S NAME AND ADDRESS:

Franchini LLC
8327 PARK PLACE
IRVING, CA 95304

3. (a) BUYER'S NAME AND ADDRESS:

Ehab Abdallah and Roland Segal
10840 E Scopa TRL
Scottsdale, AZ 85262

(b) Are the Buyer and Seller related? Yes ☐ No ☒

If Yes, state relationship: _____

4. ADDRESS OF PROPERTY:

2338 East Minton Street
Mesa, AZ 85213

5. (a) MAIL TAX BILL TO: (Taxes due even if no bill received)

Ehab Abdallah and Roland Segal
10840 E Scopa TRL
Scottsdale, AZ 85262

(b) Next tax payment due 4-25

6. PROPERTY TYPE (for primary parcel): NOTE: Check Only One Box

- a. ☐ Vacant land f. ☐ Commercial or Industrial Use
b. ☒ Single Family Residence g. ☐ Agriculture
c. ☐ Condo or Townhouse h. ☐ Mobile or manufactured Home
i. ☐ Other Use; Specify: _____
d. ☐ 2-4 Plex
e. ☐ Apartment Building

7. RESIDENTIAL BUYER'S USE: If you checked b, c, d or h in item 6 above, please check one of the following:

- a. ☐ To be used as a primary residence.
b. ☒ To be rented to someone other than a "qualified family member."
c. ☐ To be used as a non-primary or secondary residence.

See reverse side for definition of a "primary residence, secondary residence" and "family member."

8. If you checked e or f in item 6 above, indicate the number of units:

For Apartments, Motels / Hotels, Mobile Home / RV Parks, etc.

THE UNDERSIGNED BEING DULY SWORN, ON OATH, SAYS THAT THE FOREGOING INFORMATION IS A TRUE AND CORRECT STATEMENT OF THE FACTS PERTAINING TO THE TRANSFER OF THE ABOVE DESCRIBED PROPERTY.

Signed in court report

Signature of Seller / Agent

State of Arizona, County of Maricopa

Subscribed and sworn to before me on this _____ day of _____ 20 _____

Notary Public _____

Notary Expiration Date _____

DOR FORM 82162 (04/2014)

9. TYPE OF DEED OR INSTRUMENT (Check Only One Box):

- a. ☒ Warranty Deed d. ☐ Contract or Agreement
b. ☐ Special Warranty Deed e. ☐ Quit Claim Deed
c. ☐ Joint Tenancy Deed f. ☐ Other: _____

10. SALE PRICE: \$ 1,744,000.00 00

11. DATE OF SALE (Numeric Digits): 1 / 1 / 2 4
Month/Year

12. DOWN PAYMENT: \$ 436,000.00 00

13. METHOD OF FINANCING:

- a. ☐ Cash (100% of Sale Price) e. ☒ New loan(s) from
Financial institution:
b. ☐ Barter or trade (1) ☒ Conventional
(2) ☐ VA
c. ☐ Assumption of existing loan(s) (3) ☐ FHA
f. ☐ Other financing; Specify: _____
d. ☐ Seller Loan (Carryback)

14. PERSONAL PROPERTY (see reverse side for definition):

- (a) Did the Sale Price in Item 10 include Personal Property that impacted the Sale Price by 5 percent or more? Yes ☐ No ☒

- (b) If Yes, provide the dollar amount of the Personal Property:

\$ 0.00 00 AND

briefly describe the Personal Property: _____

15. PARTIAL INTEREST: If only a partial ownership interest is being sold, briefly describe the partial interest: na

16. SOLAR / ENERGY EFFICIENT COMPONENTS:

- (a) Did the Sale Price in Item 10 include solar energy devices, energy efficient building components, renewable energy equipment or combined heat and power systems that impacted the Sale Price by 5 percent or more? Yes ☐ No ☒

If Yes, briefly describe the solar / energy efficient components: _____

17. PARTY COMPLETING AFFIDAVIT (Name, Address, Phone Number):

Ehab Abdallah and Roland Segal
10840 E Scopa TRL
Scottsdale, AZ 85262

18. LEGAL DESCRIPTION (attach copy if necessary):

HERMOSA VISTAS MCR 455-17

Signature of Buyer / Agent

State of Arizona, County of Maricopa

Subscribed and sworn to before me on this 13 day of Nov 20 24

Notary Public _____

Notary Expiration Date 6-16-2028

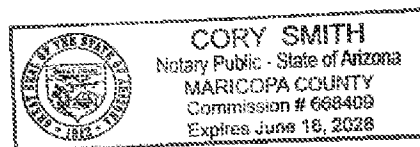


EXHIBIT 'A'

File No.: **203-6329560 (BAB)**

Property: **2338 East Minton Street, Mesa, AZ 85213**

Lot 13, of HERMOSA VISTAS, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 455 of Maps, Page 17 and Certificate of Correction recorded as 99-0986326 and Affidavit of change recorded as 2001-0791571, both of official records.

A.P.N. 141-06-237 0

AFFIDAVIT OF PROPERTY VALUE**1. ASSESSOR'S PARCEL IDENTIFICATION NUMBER(S)**

Primary Parcel: 141-06-237 0 - BOOK MAP PARCEL SPLIT

Does this sale include any parcels that are being split / divided?

Check one: Yes ☐ No ☒

How many parcels, other than the Primary Parcel, are included in this sale? _____

Please list the additional parcels below (attach list if necessary):

(1) _____ (2) _____
(3) _____ (4) _____

2. SELLER'S NAME AND ADDRESS:

Franchini LLC

8327 Park Place

Tracy, CA 95304

3. (a) BUYER'S NAME AND ADDRESS:

Ehab Abdallah and Roland Segal

10840 E Scopa TRL

Scottsdale, AZ 85262

(b) Are the Buyer and Seller related? Yes ☐ No ☒

If Yes, state relationship: _____

4. ADDRESS OF PROPERTY:

2338 East Minton Street

Mesa, AZ 85213

5. (a) MAIL TAX BILL TO: (Taxes due even if no bill received)

Ehab Abdallah and Roland Segal

10840 E Scopa TRL

Scottsdale, AZ 85262

(b) Next tax payment due 4-25

6. PROPERTY TYPE (for primary parcel): NOTE: Check Only One Box

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b. ☒ Single Family Residence g. ☐ Agriculture
c. ☐ Condo or Townhouse h. ☐ Mobile or manufactured Home
d. ☐ 2-4 Plex i. ☐ Other Use; Specify: _____
e. ☐ Apartment Building

7. RESIDENTIAL BUYER'S USE: If you checked b, c, d or h in item 6 above, please check one of the following:

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b. ☒ To be rented to someone other than a "qualified family member."
c. ☐ To be used as a non-primary or secondary residence.

See reverse side for definition of a "primary residence, secondary residence" and "family member."

8. If you checked e or f in item 6 above, indicate the number of units:

For Apartments, Motels / Hotels, Mobile Home / RV Parks, etc.

THE UNDERSIGNED BEING DULY SWORN, ON OATH, SAYS THAT THE FOREGOING INFORMATION IS A TRUE AND CORRECT STATEMENT OF THE FACTS PERTAINING TO THE TRANSFER OF THE ABOVE DESCRIBED PROPERTY.

Ehab Abdallah and Roland Segal
Signature of Seller / Agent

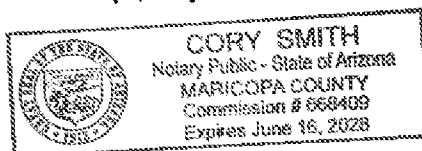
State of Arizona, County of Maricopa

Subscribed and sworn to before me on this 14 day of Nov 2024

Notary Public

Notary Expiration Date 6-16-2028

DOR FORM 82162 (04/2014)

**FOR RECORDER'S USE ONLY****9. TYPE OF DEED OR INSTRUMENT (Check Only One Box):**

- a. ☒ Warranty Deed d. ☐ Contract or Agreement
b. ☐ Special Warranty Deed e. ☐ Quit Claim Deed
c. ☐ Joint Tenancy Deed f. ☐ Other:

10. SALE PRICE: \$ 1,744,000.00 00

11. DATE OF SALE (Numeric Digits): 1 / 1 / 2 4
Month/Year

12. DOWN PAYMENT \$ 436,000.00 00

13. METHOD OF FINANCING:

- a. ☐ Cash (100% of Sale Price) e. ☒ New loan(s) from
Financial Institution:
b. ☐ Barter or trade (1) ☒ Conventional
(2) ☐ VA
c. ☐ Assumption of existing loan(s) (3) ☐ FHA
f. ☐ Other financing; Specify: _____
d. ☐ Seller Loan (Carryback)

14. PERSONAL PROPERTY (see reverse side for definition):

- (a) Did the Sale Price in item 10 include Personal Property that impacted the Sale Price by 5 percent or more? Yes ☐ No ☒

- (b) If Yes, provide the dollar amount of the Personal Property:

\$ 0.00 00 AND

briefly describe the Personal Property: _____

15. PARTIAL INTEREST: If only a partial ownership interest is being sold, briefly describe the partial interest: na**16. SOLAR / ENERGY EFFICIENT COMPONENTS:**

- (a) Did the Sale Price in Item 10 include solar energy devices, energy efficient building components, renewable energy equipment or combined heat and power systems that impacted the Sale Price by 5 percent or more? Yes ☐ No ☒

If Yes, briefly describe the solar / energy efficient components: _____

17. PARTY COMPLETING AFFIDAVIT (Name, Address, Phone Number):

Ehab Abdallah and Roland Segal

10840 E Scopa TRL

Scottsdale, AZ 85262

18. LEGAL DESCRIPTION (attach copy if necessary):

HERMOSA VISTAS MCR 455-17

Signed in counterpart

Signature of Buyer / Agent

State of Arizona, County of Maricopa

Subscribed and sworn to before me on this _____ day of _____ 20____

Notary Public

Notary Expiration Date _____

EXHIBIT 'A'

File No.: **203-6329560 (BAB)**

Property: **2338 East Minton Street, Mesa, AZ 85213**

Lot 13, of HERMOSA VISTAS, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 455 of Maps, Page 17 and Certificate of Correction recorded as 99-0986326 and Affidavit of change recorded as 2001-0791571, both of official records.

A.P.N. 141-06-237 0

EXHIBIT D

REVIEWED

By PW at 02/04/2025 15:15:30

APPROVED

By CB at 02/05/2025 13:57:35

PMT24-21631



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

Facility Name: Legacy Recovery Center

Number of Residents: 10 Fire Sprinklers Installed? ☒ Yes ☐ No

Facility's Address: 2338 E. Minton Street

City: Mesa State: AZ Zip Code: 85213

Facility's Mailing Address, if different: _____

City: _____ State: _____ Zip Code: _____

Facility's Phone Number: (936) 615-0981 Facility's E-Mail: richard@legacyrecoverycenter.com

Facility's Operator: Richard Miller, CEO of Legacy Recovery Center, LLC

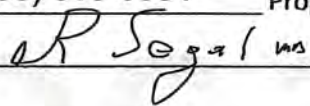
Operator's Phone Number: (936) 615-0981 Operator's E-Mail: richard@legacyrecoverycenter.com

Property Owner (Print): Roland Segal

Property Owner's Address: 24745 S. Lindsay Road

City: Chandler State: AZ Zip Code: 85249

Property Owner's Phone Number: (936) 615-0981 Property Owner's E-Mail: drsegal@azforensicpsychiatry.com

Property Owner's Signature:  (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.

I affirm that the information presented in support of this registration is true and correct to the best of my knowledge:


Applicant's Signature

1/28/2025
Date

FYI -- Property is in the Single Residence-15 (RS-15) zoning district, meets the 1,200 feet separation requirement and is eligible to be a Registered Community Residence with a maximum of 10 residents.

PMT24-21631



Occupancy Confirmation Worksheet

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

Property Address: 2338 E. Minton St., Mesa, Arizona

Facility Name: Legacy Recovery Center

Type of residential care Facility as licensed: Behavioral Health Home

Number of Care Residents (not including staff): 10

Is the home equipped with automatic fire sprinkler protection and attic protection monitored off site by a third party in accordance with [Mesa Fire Code](#)? Yes* ☐ No ☒ *If Yes, Provide a Current Third Party Fire Inspection Report.

Select the appropriate occupancy group, per [Mesa Building Code](#) and [Mesa Fire Code](#):

R-5. Residential Group R-5 occupancies where the occupants are primarily permanent in detached one- and two-family dwellings and multiple single-family dwellings (townhouses) and their accessory structures conforming with the Mesa Residential Code. 24-hour care facility R-5 occupancies include:

☐ **R-5 Residential care/assisted living facility, with 5 or fewer residents**, all capable of self-preservation or responding to an emergency situation without physical assistance from staff. MBR 4-2-1 Section 310.6

☐ **R-5 Residential care/assisted living homes** including facilities providing directed care services, with 5 or fewer residents, any (persons) not capable of self-preservation or responding to an emergency situation without physical assistance from staff. Such assisted living homes shall be protected with automatic sprinkler systems in accordance with section 903.3 and a smoke alarm system in accordance with section 907.2.10.1.3. MBR 4-2-1 Section 310.6

R-4 Residential Group R-4 occupancy for **more than five but not more than 10 persons** in care (per MZO 11-31-14), excluding staff, who reside on a 24-hour basis in a supervised residential environment and receive custodial care (*custodial care includes persons receiving care who have the ability to respond to emergency situations and evacuate at a slower rate and/or who have mental and psychiatric complications*). R-4 includes, but is not limited to, the following: Alcohol and drug center, Assisted living facilities, Congregate care facilities, Group Home, Halfway Houses, Residential board and care facilities, Social rehabilitations.

☒ **R-4 Condition 1;** 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. MBR 4-2-1 Section 310.5

☐ **R-4 Condition 2;** Residential care home with **6 to 10 residents** [per [Mesa Zoning Ordinance](#)], not including staff, all capable of self-preservation. 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

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 local jurisdiction approval. The applicant is confirming the true and correct occupancy for this facility.

I affirm that the information presented in support of this registration is true and correct to the best of my knowledge:

Heather N. Dukes

11/22/2024

Applicant Printed Name

Applicant Signature

Date


PMT24-21631



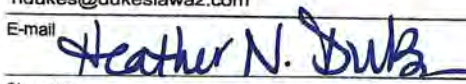
Property Owner's Authorization Signature Form

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

Property Owner:

Ehab Abdallah and Roland Segal
Name
24745 S. Lindsay Road, Chandler, AZ 85249
Address (Street, City, State, Zip Code)
(936)615-0981
Phone Number
N/A
Fax Number
esabdallah07@gmail.com; drsegal@azforensicpsychiatry.com
E-mail

Signature
11/18/24
Date

Applicant:

Heather N. Dukes of Dukes Law, PLLC
Name
5527 N. 25th Street, Phoenix, AZ 85016
Address (Street, City, State, Zip Code)
602-320-8866
Phone Number
N/A
Fax Number
hdukes@dukeslawaz.com
E-mail

Signature
11/18/2024
Date
N/A
Registration Number (required for professional registrants)

Address of Site: 2338 E. Minton Street, Mesa, AZ 85213

APN: 141-06-237

Select 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

☐ Annexation

☐ General Plan Amendment – Major

☒ Community Residence [Residential Care Home]

☐ Group Foster Care Home [DCS]

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 Facility. Name: Legacy Recovery Center. 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.

DUKES LAW, PLLC

5527 N. 25th Street
Phoenix, AZ 85016
602.320.8866

VIA EMAIL

Pamela Williams
Charlotte Bridges
CITY OF MESA
Development Services Department
55 N. Center Street
Mesa, AZ 85211-1466

January 28, 2025

RE: 1st Revised Narrative for Family Community Residence Located at 2338 E. Minton Street,
Mesa, AZ 85213 (Assessor Parcel Number 141-06-237) (the "Property")

Dear Ms. Williams and Ms. Bridges,

On behalf of my clients, Legacy Recovery Center, LLC, an Arizona limited liability company, ("Legacy" or the "Applicant") and the owners of the above-referenced Property, Roland Segal and Ehab Abdallah (the "Property Owners"), I am submitting this narrative in support of the enclosed community residence application for a behavioral health residence. The Property is comprised of approximately 0.48 acres within the RS-15 residential zoning district and has been developed with a large home offering 6 bedrooms and approximately 6,194 s.f. of livable space. The Property is being licensed as a behavioral health residential facility ("BHRF") with the Arizona Department of Health Services.

The following information is responsive to the City's request for a narrative describing the proposed family community residence:

- The name of the facility:
 - Legacy Recovery Center, LLC will be the license-holder and applicant.
- The type of Community Residence:
 - Family Community Residence specializing in residential behavioral health
- The number of residents:
 - Up to 10 residents:
- The age range of the residents
 - Adults (Typically 18 to 60 years old)

PMT24-21631

- **What Arizona State agency will be licensing this facility?**
 - The Arizona Department of Health Services will be licensing this residence as a behavioral health residential facility.
- **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. They are ambulatory and able to complete tasks and chores necessary to live as a family.
- **Does the residence have fire sprinklers?**
 - Yes
- **Explain what services are provided at the facility.**
 - The residents at the property are in treatment/recovery for substance and alcohol use, with some residents seeking treatment for co-occurring behavioral health issues (i.e. depression, anxiety). The only individuals receiving treatment at the location will be the 10 individuals approved to occupy the home. Legacy's housing replicates a family environment in the look and feel of the home. Residents at Legacy are not adjudicated, and they come to the program of their own free will to seek help with behavioral health issues. Clinical services provided on-site include resident assessments, individual therapy, and group therapy. The therapists and house managers will also assist with teaching life skills such as cooking and cleaning, resume building, and employer interview coaching.
 - No medical or treatment services will be provided at the Property that would not typically occur in a residential setting. A nursing assessment and vitals check are completed upon intake, but those are the only medical services provided at the location. No detoxification will occur on-site.
 - The residents live in a family environment and emulate a family. They go grocery shopping, cook, clean and complete chores together. They hold each other accountable and support one another.
- **Explain how the residents are supervised at the facility.**
 - The residence will be staffed at all hours. No staff live on-site. There will be a total of 6-7 staff members with staggered shifts, as follows:
 - A house manager who will be scheduled in shifts throughout the week.
 - A licensed therapist who will provide individual and group therapy intermittently on weekdays (Monday through Friday).
 - A staff member to coordinate transportation for resident appointments and to provide support to residents in the event the house manager is busy helping another resident.
 - A registered, on-call nurse,
 - A program director, and

PMT24-21631

- Richard Miller, CEO and Member of Legacy Recovery Center, LLC.
- Typically, a max of 2-3 staff members will be on-site between 8 a.m. and 4 p.m. Approximately 2 staff members will be on-site after hours.
- **Length of Residency**
 - There is no maximum or minimum time period that residents may live at the home. Some residents may live there for 3-6 months while others may choose to live there for longer than a year.
- **Vehicles**
 - Residents living in the community residence do not have their own vehicles on-site. Legacy staff will provide transportation to residents with a company vehicle.
- **Visitors**
 - Visitors at the location will be allowed in the evenings from 4 to 8 pm during the week, and weekends from 4 to 9 pm. Legacy allows up to 2 adult visitors per resident, with one-hour time slots. The visitors are staggered so that only 2 to 3 residents have visitors on-site at any given time.
- **Contact Information for Person Responsible for Facility**
 - **Contact Name:** Richard Miller, CEO and Member
 - **Mailing Address:** LEGACY RECOVERY CENTER
24745 S. Lindsay Road
Chandler, AZ 85249
 - **Email Address:** richard@legacyrecoverycenter.com
 - **Phone No.:** (936) 615-0981

If you need any additional information or documentation to process this request, please do not hesitate to contact me at the email address or phone number below. Thank you.

Very truly yours,

/s/ Heather N. Dukes

Heather N. Dukes, Esq.

602.320.8866 | hdukes@dukeslawaz.com

Enclosures

PMT24-21631

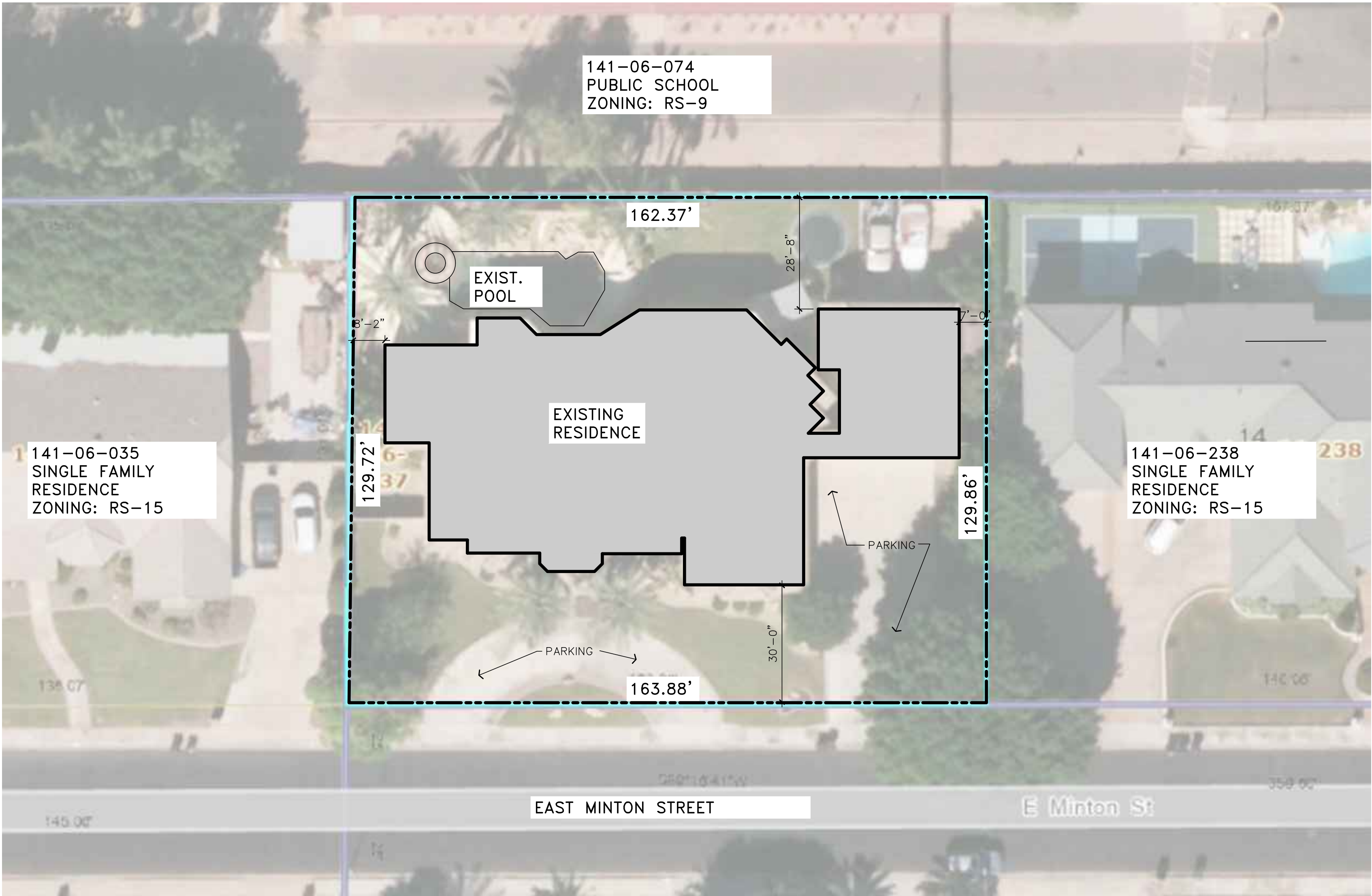
PROJECT DATA AND STATISTICS	BUILDING CODE DATA	PROJECT DESCRIPTION
<div>SITE ADDRESS: 2338 E MINTON, MESA, ARIZONA 85213</div> <div>PARCEL NUMBER: 141-06-237</div> <div>EXISTING ZONING: RS-15</div> <div>EXISTING USE: SINGLE FAMILY RESIDENTIAL</div> <div>PROPOSED USE: FAMILY COMMUNITY RESIDENCE</div> <div>ADJACENT ZONING DISTRICTS:<div>WEST: RS-15</div><div>NORTH: RS-9</div><div>EAST: RS-15</div><div>SOUTH: RS-15</div></div> <div>LOT SIZE & SITE DIMENSIONS: 21,073 SF (0.48 ACRES)</div>	<div>APPLICABLE BUILDING CODES:<div>2018 IRC</div><div>2018 IECC</div><div>CITY OF MESA AMENDMENTS</div></div> <div>BUILDING AREAS:<div>TOTAL EXISTING LIVABLE BUILDING AREA: 6194 SF</div><div>TOTAL NON-LIABLE BUILDING AREA: 2180 SF</div><div>TOTAL COVERED PATIO AREA: 991 SF</div></div> <div>ALLOWABLE AREA:<div>CONSTRUCTION TYPE: TYPE V-B</div><div>OCCUPANCY : R-4</div></div> <div>OCCUPANCY COUNT:<div>10 RESIDENTS</div></div>	<div>CONVERT A SINGLE FAMILY RESIDENCE TO A FAMILY COMMUNITY RESIDENCE WITH A BEHAVIORAL HEALTH RESIDENTIAL FACILITY LICENSE TO BE ISSUED BY THE ARIZONA DEPARTMENT OF HEALTH SERVICES.</div> <div>ARCHITECT INFO<div>ARCHITECT: ON POINT ARCHITECTURE, LLC.<div>NICOLE POSTEN, RA</div><div>1152 E GREENWAY ST., STE 5</div><div>MESA, ARIZONA 85203</div></div></div>



1152 E GREENWAY ST. SUITE 5
MESA, ARIZONA 85203
WWW.ONPOINTARCHITECTURE.COM
PHONE: (480) 227-5259



JOB NO: 2425



SITE PLAN
SCALE: 1"= 20'



FAMILY COMMUNITY RESIDENCE
for
LEGACY RECOVERY CENTER
2338 E MINTON ST.
MESA, AZ 85213

NOTES: 1. THIS DRAWING IS AN INSTRUMENT OF SERVICE AND IS THE SOLE PROPERTY OF ON POINT ARCHITECTURE, LLC. ANY USE OF THIS DRAWING WITHOUT THE WRITTEN CONSENT OF ON POINT ARCHITECTURE, LLC IS PROHIBITED. 2. DRAWING SCALES INDICATED ARE FOR REFERENCE ONLY AND ARE NOT INTENDED TO ACCURATELY REFLECT ACTUAL OR DESIGN CONDITIONS. WRITTEN DIMENSIONS SHALL GOVERN. 3. ALWAYS USE DIMENSIONS AS SHOWN. DRAWINGS ARE NOT TO BE SCALED.	
DATE	ITEM
11/20/24	OWNER REVIEW

SITE PLAN
FOR REFERENCE
ONLY

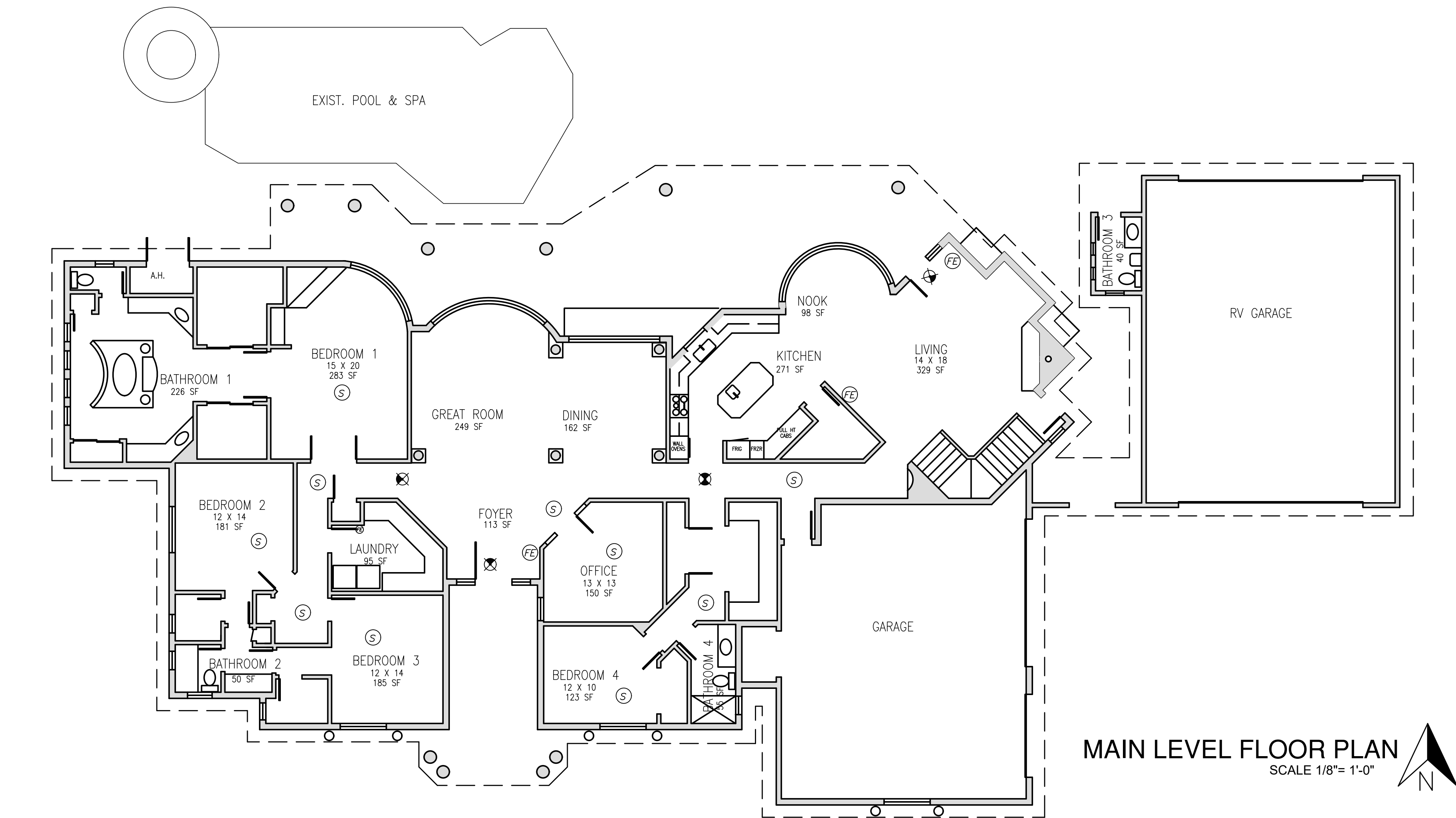
DWG NO:

A1
PMT24-21631



JOB NO: 2425

FAMILY COMMUNITY RESIDENCE
for
LEGACY RECOVERY CENTER
2338 E MINTON ST.
MESA AZ 85213



PLAN SYMBOLS

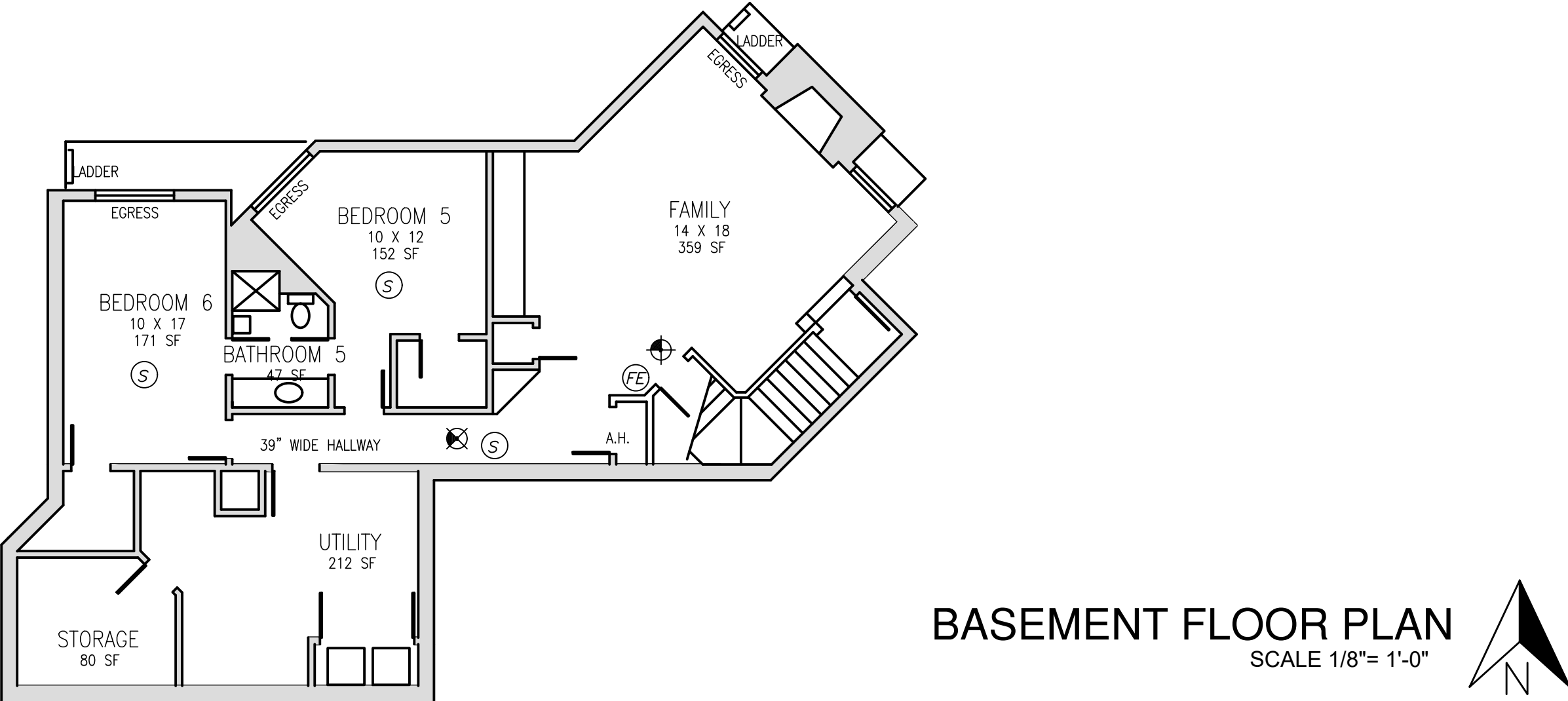
LIT EXIT SIGN

2A10BC FIRE EXTINGUISHER ON WALL CLIP
- MAX TRAVEL DISTANCE= 75'

SMOKE DETECTORS

FIRE SPRINKLER NOTE

THIS RESIDENCE HAS AN EXISTING AUTOMATIC FIRE SPRINKLER SYSTEM.



NOTES: THIS DRAWING IS AN INSTRUMENT OF SERVICE AND IS THE SOLE PROPERTY OF ONPOINT ARCHITECTURE, LLC. ANY USE OF THIS DRAWING WITHOUT THE WRITTEN CONSENT OF ONPOINT ARCHITECTURE, LLC IS PROHIBITED.

DRAWING SCALES INDICATED ARE FOR REFERENCE ONLY AND ARE NOT INTENDED TO ACCURATELY REFLECT ACTUAL OR DESIGN CONDITIONS. WRITTEN DIMENSIONS SHALL GOVERN.

ALWAYS USE DIMENSIONS AS SHOWN. DRAWINGS ARE NOT TO BE SCALED.

DATE	ITEM
11/20/24	OWNER REVIEW

FLOOR PLAN
FOR REFERENCE
ONLY

DWG NO:

A2

ARTICLES OF ORGANIZATION

OF LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: LEGACY RECOVERY CENTER, LLC
ENTITY ID: 23282452
ENTITY TYPE: Domestic LLC
EFFECTIVE DATE: 10/08/2021
CHARACTER OF BUSINESS: Health Care and Social Assistance
MANAGEMENT STRUCTURE: Member-Managed
PERIOD OF DURATION: Perpetual
PROFESSIONAL SERVICES: N/A

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: Ehab S. Abdallah
PHYSICAL ADDRESS: 8350 E Raintree Dr. Suite 130, SCOTTSDALE, AZ 85262
MAILING ADDRESS: 8350 E Raintree Dr. Suite 130, SCOTTSDALE, AZ 85262

PRINCIPAL ADDRESS

4666 E. Redfield Road, GILBERT, AZ 85234

PRINCIPALS

Member: Ehab S. Abdallah - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85259, USA -
esabdallah07@gmail.com - Date of Taking Office:

Member: Richard Cullen Miller - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85259, USA -
rcm6113@gmail.com - Date of Taking Office:

Member: Roland Segal - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85259, USA -
drsegal@azforensicpsychiatry.com - Date of Taking Office:

ORGANIZERS

Ehab S. Abdallah: 10840 E Scopa TRL, SCOTTSDALE, AZ, 85262, USA, esabdallah07@gmail.com

Richard Cullen Miller: 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85259, USA, rcm6113@gmail.com

Roland Segal: 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85259, USA, drsegal@azforensicpsychiatry.com

SIGNATURES

Organizer: Ehab S. Abdallah - 10/08/2021

Organizer: Richard Cullen Miller - 10/08/2021

Organizer: Roland Segal - 10/08/2021

PMT24-21631

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: LEGACY RECOVERY CENTER, LLC
ENTITY ID: 23282452
ENTITY TYPE: Domestic LLC
PERIOD OF DURATION: Perpetual
PROFESSIONAL SERVICES:
CHARACTER OF BUSINESS: Health Care and Social Assistance
MANAGEMENT STRUCTURE: Member-Managed

FORMER ENTITY NAME No name change

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: Ehab S. Abdallah
PHYSICAL ADDRESS: 8350 E Raintree Dr. Suite 130, SCOTTSDALE, AZ 85262
MAILING ADDRESS: 8350 E Raintree Dr. Suite 130, SCOTTSDALE, AZ 85262

KNOWN PLACE OF BUSINESS

4666 E. Redfield Road, GILBERT, AZ 85234

PRINCIPALS

Member: Andy Bennett - 8350 E. Raintree Dr., Suite 130, SCOTTSDALE, AZ, 85259, USA - - Date of Taking Office:

Member: Ehab S. Abdallah - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85259, USA -
esabdallah07@gmail.com - Date of Taking Office:

Member: Richard Cullen Miller - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85259, USA -
rcm6113@gmail.com - Date of Taking Office:

Member: Roland Segal - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85259, USA -
drsegal@azforensicpsychiatry.com - Date of Taking Office:

SIGNATURE

Member: Ehab S. Abdallah - 01/10/2022

PMT24-21631

TEXT OF AMENDMENT
FOR
LEGACY RECOVERY CENTER, LLC

The Articles of Organization for Legacy Recovery Center, LLC, are amended to add Andy Bennett, 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85259, as a member.

Ehab S. Abdallah

Ehab S. Abdallah, Member

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: LEGACY RECOVERY CENTER, LLC
ENTITY ID: 23282452
ENTITY TYPE: Domestic LLC
PERIOD OF DURATION: Perpetual
PROFESSIONAL SERVICES:
CHARACTER OF BUSINESS: Health Care and Social Assistance
MANAGEMENT STRUCTURE: Member-Managed

FORMER ENTITY NAME No name change

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: Ehab S. Abdallah
PHYSICAL ADDRESS: 8350 E Raintree Dr. Suite 130, SCOTTSDALE, AZ 85260
MAILING ADDRESS: 8350 E Raintree Dr. Suite 130, SCOTTSDALE, AZ 85260

KNOWN PLACE OF BUSINESS

24745 S. Lindsay Road, CHANDLER, AZ 85249

PRINCIPALS

Member: Ehab S. Abdallah - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85260, USA -
esabdallah07@gmail.com - Date of Taking Office:

Member: John Bennett - 8350 E. Raintree Dr., Suite 130, SCOTTSDALE, AZ, 85260, USA - - Date of Taking
Office:

Member: Richard Cullen Miller - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85260, USA -
rcm6113@gmail.com - Date of Taking Office:

Member: Roland Segal - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85260, USA -
drsegal@azforensicpsychiatry.com - Date of Taking Office:

SIGNATURE

Member: Ehab S. Abdallah - 03/31/2022

PMT24-21631

TEXT OF AMENDMENT
FOR
LEGACY RECOVERY CENTER, LLC

The Articles of Organization for Legacy Recovery Center, LLC, are amended to:

1. Change the street and mailing address of the statutory agent, Ehab S. Abdallah, from 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85262, to 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85260;
2. Change the address of member, Ehab S. Abdallah, from 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85259, to 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85260;
3. Change the address of member, Richard Cullen Miller, from 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85259, to 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85260;
4. Change the address of member, Roland Segal, from 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85259, to 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85260;
5. Change the name and address of member, Andy Bennett, from Andy Bennett, 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85259, to John Bennett, 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85260;
6. Change the address of the LLC's known place of business from 4666 E. Redfield Road, Gilbert, Arizona 85234, to 24745 S. Lindsay Road, Chandler, Arizona 85249.

Ehab S. Abdallah

Ehab S. Abdallah, Member

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

LIMITED LIABILITY COMPANY

ENTITY INFORMATION

ENTITY NAME: LEGACY RECOVERY CENTER, LLC
ENTITY ID: 23282452
ENTITY TYPE: Domestic LLC
PERIOD OF DURATION: Perpetual
PROFESSIONAL SERVICES:
CHARACTER OF BUSINESS: Health Care and Social Assistance
MANAGEMENT STRUCTURE: Member-Managed

FORMER ENTITY NAME No name change

STATUTORY AGENT INFORMATION

STATUTORY AGENT NAME: Ehab S. Abdallah
PHYSICAL ADDRESS: 8350 E Raintree Dr. Suite 130, SCOTTSDALE, AZ 85260
MAILING ADDRESS: 8350 E Raintree Dr. Suite 130, SCOTTSDALE, AZ 85260

KNOWN PLACE OF BUSINESS

24745 S. Lindsay Road, CHANDLER, AZ 85249

PRINCIPALS

Member: Ehab S. Abdallah - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85260, USA -
esabdallah07@gmail.com - Date of Taking Office:

Member: Richard Cullen Miller - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85260, USA -
rcm6113@gmail.com - Date of Taking Office:

Member: Roland Segal - 8350 E Raintree Dr Suite 130, SCOTTSDALE, AZ, 85260, USA -
drsegal@azforensicpsychiatry.com - Date of Taking Office:

SIGNATURE

Member: Ehab S. Abdallah - 08/05/2024

PMT24-21631

TEXT OF AMENDMENT
FOR
LEGACY RECOVERY CENTER, LLC

The Articles of Organization for Legacy Recovery Center, LLC, are amended to remove John Bennett, 8350 E. Raintree Dr., Suite 130, Scottsdale, Arizona 85260, as a member.

Ehab S. Abdallah
Ehab S. Abdallah, Member



ARIZONA FIRE SYSTEMS
2098 S. SAILOR WAY
GILBERT, AZ 85295
602-714-0801
chad@arizonafiresystems.com
ROC # C16 310827



Annual Fire Sprinkler Report

CUSTOMER INFORMATION

Legacy Recovery Center
2338 E Minton St.
Mesa, AZ 85213
Phone 936-615-0981 /
E-mail rcm6113@gmail.com
Customer # Ticket #
Date January 24th, 2025
Next Insp. January 1, 2026

SYSTEM INFORMATION

System # 1
Location Garage Access Hatch
Mfg/Size Residential / 1"
System Type

SYSTEM TEST & CONDITION

Main control valve exercised and is in good condition? Type: Ball Valve Yes
Alarm Valve Internally Inspected? N/A
Main waterflow switch operating properly? Yes
Set @ Low Trip @ 2 Sec.
Main tamper switch operating properly? N/A
Local alarm operating properly? Yes
ITV Location At Riser
All visible piping and heads free of rust, dust, corrosion and leaks? Yes
All visible hangers and bracing in good condition? Yes
Sprinkler coverage acceptable? Yes
FDC has caps/plugs, is working properly, unobstructed & correct threads? N/A
Spare head box present & complete? Yes
Missing?
Flow Test System gauge's MFG Date: 11/22/22
Pressure Before Residual After
100 / N/A 80 100

SYSTEM INFORMATION

System # 2
Location
Mfg/Size
System Type

SYSTEM TEST & CONDITION

Main control valve exercised and is in good condition? Type:
Alarm Valve Internally Inspected?
Main waterflow switch operating properly? Set @ Trip @ Sec.
Main tamper switch operating properly?
Local alarm operating properly?
ITV Location
All visible piping and heads free of rust, dust, corrosion and leaks?
All visible hangers and bracing in good condition?
Sprinkler coverage acceptable?
FDC has caps/plugs, is working properly, unobstructed & correct threads?
Spare head box present & complete? Missing?
Flow Test System gauge's MFG Date:
Pressure Before Residual After
 /

Comments:

Found two sprinkler heads in basement room which were taped for painting purposes. Tape was removed.
Provided to customer spare head box and wrench. Customer had spare heads from another location to fill box.

CERTIFICATION OF SYSTEM OPERATION All operational features and functions of this system were tested this service in accordance with the NFPA 25 as well as local AHJ requirements and was found to be: Passing

PMT24-21631

EXHIBIT E



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 effective February 10, 2019, certifying that on this date the structure and site listed below is in compliance with said Code (International Codes) and with Title XI, of the Mesa City Code entitled "Zoning" and with the various ordinances of the City regulating building construction and use insofar as ascertained by the undersigned:

Building Permit #: PMT24-21631
Owner's Name: Roland Segal and Ehab Abdallah
Owner's Address: 24745 S. Lindsay Road, Chandler, AZ. 85249
Project Address: 2338 E MINTON ST, MESA, AZ 85213
Project Name: Legacy Recovery Center

OCCUPANCY:	Occupancy Group	Constr Type	Sq Ft	Occ Load
	R-4 Residential Care/Assisted Living	VB	5194	
	Total SQ FT :			5194

Zoning District: RS-15

Special Stipulations/Conditions: R-4 Condition 1
No Fire Sprinklers Required
Approved for up to 10 Residents Excluding Staff

Deputy Director/Building Official: John Sheffer

Date: 02/06/2025

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

EXHIBIT F



ARIZONA DEPARTMENT
OF HEALTH SERVICES

LEGACY RECOVERY CENTER, LLC
Legacy Recovery Center
2338 East Minton Street
Mesa, AZ 85213

The facility above is licensed to operate as a(n) Behavioral Health Residential Facility. This license has been issued under the authority of Title 36, Chapter 4, Arizona Revised Statutes and pursuant to Department of Health Services' Rules, is not transferable and is valid only for the location identified above.

THIS CERTIFICATE IS NOT TRANSFERABLE

License Number: BHRF20001

Effective Date: March 27, 2025

Expiration Date: March 26, 2026

Total Capacity: 10

HEALTH AND WELLNESS FOR ALL ARIZONANS

PURSUANT TO A.R.S. §41-1092.11 (A), UPON SUBMITTAL OF A TIMELY AND SUFFICIENT APPLICATION
THIS LICENSE WILL REMAIN IN EFFECT UNTIL REISSUED OR REVOKED
TO BE FRAMED AND DISPLAYED IN A CONSPICUOUS PLACE

Recommended By: Tiffany Slater, Bureau Chief

Issued By: Tom Salow, Assistant Director



ARIZONA DEPARTMENT
OF HEALTH SERVICES

LEGACY RECOVERY CENTER, LLC
Legacy Recovery Center
2338 East Minton Street
Mesa, AZ 85213
Facility Services

Services for Individuals 18 Years of Age and Older - Residential

A handwritten signature in black ink, appearing to read 'Tiffany Slater'.

Recommended By: Tiffany Slater, Bureau Chief

A handwritten signature in black ink, appearing to read 'Tom Salow'.

Issued By: Tom Salow, Assistant Director

EXHIBIT G



April 2, 2025

HCO ID: # 677550

Richard Miller
CEO
Legacy Recovery Center, LLC
24745 S Lindsay Rd
Chandler, Arizona 85249

Dear Mr. Miller:

This letter is to confirm that The Joint Commission considers Legacy Recovery Center, LLC accredited under the *Comprehensive Accreditation Manual for Behavioral Health Care and Human Services* for the following:

1. Legacy Recovery Center, LLC, 24745 S Lindsay Rd., Chandler, AZ
 - Residential Care
 - Mental Health Services for adults.
 - Substance Use Disorders for adults, non-withdrawal management
 - Care Coordination/Case Management for adults
2. Legacy Recovery Center, LLC, 2338 E. Minton Street, Mesa, AZ
 - Residential Care
 - Mental Health Services for adults.
 - Substance Use Disorders for adults, non-withdrawal management
 - Care Coordination/Case Management for adults

If I can be of further assistance I can be reached at (630) 792-5209.

Sincerely,

Bakia Johnson

Bakia Johnson
Account Executive
Accreditation and Certification Operations

cc: Correspondence File

EXHIBIT H

Admin 038 – Community Relations / Good Neighbor Policy

Policy No. & Title	Effective Date	Review/Revised Date	Pages: 2
Admin 038 – Community Relations / Good Neighbor Policy	01/01/25	7/21/2025	1 of 2

Purpose: It is the policy of Legacy Recovery Center to ensure that all residents and staff members are aware courteous and sensitive to the neighbors that reside nearby the facility. Client that could compromise the relationship with the surrounding neighborhood may not be tolerated as a condition of treatment.

POLICY

A. Legacy Recovery Center (LRC) is committed to being a respectful and responsible member of the Mesa, Arizona community. We recognize our duty to foster and maintain positive, collaborative relationships with our neighbors and the broader community. In doing so, we strengthen our program's integrity, expand our referral networks, and contribute meaningfully to the well-being of those around us.

We will demonstrate our commitment through:

- Maintaining a clean, safe, and professional physical environment, both inside and outside the facility.
- Requiring staff and clients to act respectfully and responsibly within the community.
- Promptly addressing concerns or complaints from neighbors in a constructive and transparent manner.
- Participating in Neighborhood Preservation and Improvement and Maintenance of our grounds and premises to meet such effort.
- Observe and participate in any ordinance related to noise control

B. Legacy Recovery Center (LRC) recognizes the responsibility it holds to establish and maintain a commendable on-going relationship with the neighbors and the surrounding community. We realize, in doing so, not only can we be of help and service to others, but we will benefit as well. We constantly strive to maintain a professional, useful contribution to the immediate and surrounding communities as a whole and on an individual basis. This shall be exhibited in many ways, starting with the actual physical appearance of our program, the building, exterior and interior. Both shall be maintained so as to present a neat, clean appearance at all times.

C. Clients and staff are required to consistently maintain a courteous manner with all immediate neighbors and be conscious of any possible inconveniences to them (i.e. no cars are to be parked in front of the neighbor's houses, no excessive noise, etc.).

D. Clients and staff are expected to refrain in any behavior that interferes with a neighbor's ability to enjoy their home or their property. Examples of such behavior include but are not limited to:

1. Smoking
2. Loitering
3. Lewd or offensive language
4. Cleanliness of public space around the property

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PROCEDURE

1. NEIGHBOR/COMMUNITY COMPLAINTS: In the event any staff member receives a request for additional information regarding our program or a complaint in any form, they shall follow this procedure:
 - a. RESPONSE: “In a courteous manner, offer them the contact information of the Legacy Recovery Center governing bodies so that they may contact them directly to receive information. The staff may also offer to take their contact information and advise them that the Chief Executive Officer will establish contact with them.”
 - b. Provide the CEO’s and phone number to the neighbor.
 - c. Notify the CEO, to include where possible, the individuals name, phone number, house or address, and the preferred method to contact them.
2. RESIDENT ORIENTATION:
 - a. New resident orientation will include ‘Program Rules’ and include how clients are to greet and interact with neighbors and/or concerned parties.
 - b. Smoking areas outside of Legacy Recovery Center premises are designed for safety and to ensure that neighbors in the community are not subject to secondhand smoke.
 - c. In the event that a neighbor has a complaint about smoking at one of the agency's facilities, we will make every reasonable accommodation possible in order to reduce or eliminate neighbor's exposure to secondhand smoke.
 - d. Clients and staff are expected to follow all local noise ordinances outlined by the city of Mesa as well any local jurisdiction requirements and local requirements established by a home owners association, when applicable).
3. RESOLVING COMPLAINTS: In the event a neighbor files a complaint to a client or staff at LRC’s facility, staff are instructed to file a complaint report indicating the time, place, and a description of the complaint.
 - a. All complaints filed by neighbors to clients or staff about LRC will be reviewed by LRC’s Governing Authority.
 - b. The Governing Authority, or designated representative, will respond in writing to the complainant within 10 Business days to attempt to resolve the issue.
 - c. LRC will make reasonable accommodations to attempt to resolve the
4. Code Complaints:
 - a. All complaints filed by neighbors to the City issue with the complainant. The city of Chandler will be responded to by the CEO or designated representative based on the City’s specified guidelines.

EXHIBIT I



LEGACY

RECOVERY CENTER

Legacy Recovery Center has been made aware of certain neighborhood concerns regarding our behavioral health residential facility located at 2338 East Minton Street. In response, we are providing our neighbors with information on our operations, as well as what we do and what we do not do.

We will be holding a community meeting at our property on:

Friday, March 28, 2025

2338 E. Minton Street

3pm-4pm

This is an opportunity for neighbors to share their concerns and also hear what steps Legacy Recovery Center takes to ensure the safety of the community and to operate the home as a family environment for the benefit of both the residents and surrounding single-family neighborhood.

Please understand that this meeting will remain civil at all times. Legacy Recovery Center reserves the right to end the meeting and request that all attendees vacate the property in the event common decency and respect are not observed.

Light refreshments will be served. We look forward to meeting you!

I. The residents we treat:

- Adults 18+ **Only**
- Individuals suffering from a variety of mental health disorders including: PTSD, Anxiety, Depression, Bi-polar disorder, Substance Use disorder, and other mental health disorders.

II. The residents we do not treat:

- Sex offenders
- Violent offenders
- Individuals who are experiencing detox symptoms
- Individuals who are psychotic or delusional
- Court ordered individuals
- Prison parolees
- Individuals who have a history of violence or destruction of property

III. What we are not:

- We are not a halfway house. Residents who check into our facility remain on site for the duration of their treatment (with the exception of weekend outings and any specialist medical appointments). Residents are not allowed to come and go from the property.
- We are not a psychiatric hospital. We do not treat patients who are in acute crisis. All residents at Legacy Recovery Center are stable. They are evaluated by medical, psychiatric, and clinical professionals **prior** to admission.
- We are not an adolescent treatment center.

IV. Common Demographics of Residents

- Legacy Recovery Center typically treats individuals who are higher functioning and come from a middle class to upper class background. We have treated physicians, attorneys, nurses, veterans, professors, and CEOs. We also commonly treat individuals who are college students or individuals who are everyday citizens in the workforce and public safety sector.
- The average age range of individuals who are admitted to Legacy Recovery Center is between 27 and 50. This of course varies, but all individuals are 18 years or older.

V. Owners

- The owners of Legacy Recovery Center are:
 - Dr. Roland Segal (Medical Director/Founding Member)
 - Dr. Ehab Abdallah (Medical Director/Founding Member)
 - Richard Miller (CEO)
- Dr. Segal and Dr. Abdallah are highly trained, experienced psychiatrists who have been treating clients with mental health and substance abuse issues for over two decades, for a combined total experience of 40+ years.
- Richard Miller has successfully managed operations in the treatment industry for over a decade.

VI. Staff

- Legacy Recovery Center is staffed 24/7. Our staff is comprised of: Licensed Masters-Level Therapists, Psychiatrists, Physicians Assistants, Registered Nurses, Behavioral Health Technicians, as well as operators such as the CEO, and Executive Director.
- Legacy Recovery Center employs various safety measures meant to protect both the patients and the community. These will be discussed in detail at the community meeting.