



## ASSURANCES

It is understood by the representative(s) of the organization seeking association with Indiana Affiliation of Recovery Residences (INARR) that INARR is **not** responsible for checking local or state codes for compliance. Responsibility for meeting local, state, and federal laws and codes lies with the owner/operator. The individual owner or organization seeking association with INARR assumes all liabilities for any misrepresentations.

The undersigned asserts the facility meets the following as required by each facility:

1. The organization requesting association with INARR is a legally recognized entity within the state of Indiana and meets all legal expectations of such entities: reporting, maintaining records, providing financial data, etc.
2. The organization requesting association with INARR has a Federal Tax Identification Number, an Employee Identification Number (EIN) that is recognized by the Internal Revenue Service (IRS) of the United States Government.
3. The organization requesting association with INARR has State of Indiana Incorporation Documents.
4. The individual facilities to be listed with INARR meet all federal, state and local ordinances and building codes required for residential or institutional buildings.
5. The facilities to be listed with INARR are regularly inspected by official fire inspectors and meet all expectations of said inspectors, including documenting fire extinguisher inspections and recording fire drills (where required).
6. The facilities to be listed with INARR meet the expectations of all legally authorized inspection agencies (elevators, automated security systems, etc.), and management can produce documentation in support of such assertions upon request.
7. The organization that manages the facilities to be listed with INARR maintains an accounting system and annual budget adequate for effective program management and meeting mandated reporting requirements.
8. The organization that manages the facilities to be listed with INARR maintains appropriate record-keeping systems for employees and residents.
9. The organization that manages the facilities assures that minutes from The Board of Directors Meetings are documented and kept on file.
10. The organization that manages the facilities maintains appropriate homeowners/renters insurance.

Name of owner/managing organization: \_\_\_\_\_

Headquarters Address: \_\_\_\_\_

List names and addresses of facilities for which the organization is seeking association with INARR:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

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*I hereby assert that the facilities listed above meet all requirements above as well as any other requirements required by law or code for my location.*

Typed (or printed) name of authorized representative: \_\_\_\_\_

Signature of authorized representative: \_\_\_\_\_ Date: \_\_\_\_\_