

## Credit Card Authorization

I, \_\_\_\_\_ (responsible party), accept full financial responsibility for all fees (rent, security deposit, damages, etc.) incurred by \_\_\_\_\_ (resident) while s/he resides at Reunion San Diego. I, \_\_\_\_\_ (resident), will check in to Reunion San Diego on \_\_\_\_\_ (date)

\_\_\_\_\_ I understand the following fee schedule:

Security deposit: \$250, refundable less any unpaid rent, damages, and expenses

Sun Suites: \$3,000 per month

California Suites: \$4,500 per month

Professional Suites: \$6,000 per month

Guests: \$100 per night per person

Lost keys: \$20 per key

House Manager assistance (shopping, transportation, etc.): \$20 per hour, billed by the quarter hour

I authorize Pyrsys Psychology Group, Inc. (PPG) to charge my credit card for the \$250 security deposit and a (indicate daily, weekly, or monthly) \_\_\_\_\_ rate of \$\_\_\_\_\_ for which above resident will receive a (please mark)

\_\_\_\_\_ Sun Suite (resident may need to change rooms to accommodate other residents)

\_\_\_\_\_ California Suite

\_\_\_\_\_ Professional Suite

My credit card will be charged on the resident's first night for the planned length of residency. If resident does not provide 24 hours advance notice of vacating, my credit card will be charged for any outstanding balance plus one night. If resident vacates earlier than planned, PPG will issue me a refund check within seven business days for any credit on resident's account. If resident departs later than planned, PPG will bill my credit card at a daily, weekly, or monthly rate, whichever is most cost-effective. For example: if residency is ten nights, PPG will charge for one week and three nights, not ten nights. A \$5 per day late fee is assessed if payment is not received within five days of initial or extended residency. Resident fees include utilities and maintenance service. I have the right to terminate this credit card authorization at any time but must do so in writing via mail or hand-delivery to 8950 Villa La Jolla Dr., B214, La Jolla, CA, 92037 or fax to 858-455-0141. The termination is effective 24 hours after PPG receives my termination letter. If I fax my termination letter to PPG, I will mail the signed original to the above address on the same day.

Check one:     VISA®                       American Express®             MasterCard®  
                   Discover® Card     PulseCard® (the healthcare credit card)

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

V-Code (See below): \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

*(V-Code: the last 3 digits in signature block on MasterCard & Visa or the 4 digit code above the account number on American Express)*

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

❖ Charge will appear on credit card statement as “PPG INC”

## Resident Agreement

I, \_\_\_\_\_, agree to reside at Reunion San Diego, San Diego, CA, 92122. I agree to follow the house rules:

### DO:

- Enjoy and maintain the serenity of this residence
- Clean up after yourself in all shared areas
- Keep your personal space neat and clean (please make your bed!)
- Safeguard your key and keep the front door locked at all times
- Maintain yourself (at all times, wherever you are) and this residence as an alcohol/other drug-free environment (except caffeine and nicotine)
- Cooperate with alcohol/drug testing if asked by Ppyrsys Psychology Group, Inc. (PPG) staff
- Follow all other reasonable directives of House Manager
- If smoking, do so only on the back patio and extinguish properly
- Communicate with the House Manager, Lead Therapist, or other PPG staff to help us make your stay comfortable and safe
- Attend the weekly Resident Counsel meetings to communicate concerns
- Respect the property, privacy, and personal rights of your fellow residents
- Respect the confidentiality of all residents (do not reveal anything about any resident to any other person)
- Accept yourself and each resident as a fallible human being who is responsible for his or her own behavior
- Follow a personal plan of change and self-improvement in consultation with PPG staff
- Keep food and beverages in the kitchen and patio area only
- Get home by 9pm each evening unless prior arrangements have been made with House Manager
- Enjoy the orientation given by the House Manager (up to 4 hours) and, if needed, employ her/him for additional assistance (shopping, transportation, etc.) at \$20 per hour, billed by the quarter hour
- Check-out time is 12:00PM

### DON'T:

- Become financially, romantically, or sexually involved with other residents and/or House Manager
- Bring any weapons into this residence or onto property
- Threaten violence or act violently
- Bring guests without advance permission
- Download programs onto the computer

I agree that for a serious violation of house rules PPG may terminate my residence agreement instantly.

All units are properly furnished and are kept clean and orderly. The Resident Council manages the utility use, furnishings, maintenance, and upgrade of all lodging units. Each resident provides her/his own food, toiletry items, electronics, and personal needs. Residents are provided with toilet paper, paper towels, kitchen utensils, kitchen appliances, washer & dryer, an elliptical trainer, and computer with internet access.

I acknowledge and understand that I am living in an alcohol/other drug-free shared housing property managed by the Resident Council. I reside as a member of a family of disabled persons sharing a housing unit and not as a tenant with rights of possession of housing space exclusively.

I agree to participate in and abide by the policies and rules of Reunion San Diego's Resident Council. I agree to vacate from Reunion San Diego if I use alcohol/other drugs (except caffeine and nicotine) or for any other serious violation of Reunion San Diego's rules.

\_\_\_\_\_ I understand the following fee schedule:

Security deposit: \$250, refundable less any unpaid rent, damages, and expenses

Sun Suite: \$3,000 per month

California Suite: \$4,500 per month

Professional Suite: \$6,000 per month

Guests: \$100 per night per person

Lost keys: \$20 per key

House Manager assistance (shopping, transportation, etc.): \$20 per hour, billed by the quarter hour

I understand that my account will be charged on my first night for the planned length of residency. A \$5 per day late fee is assessed if payment is not received within five days of initial or extended residency. Resident fees include utilities and maintenance service. I agree to provide 24 hours advance notice of vacating. My account will be billed for any balance due plus one night if I do not provide 24 hours advance notice. All damages that I or my guests cause to this property, its contents, or the possessions of other residents will be billed to my account, even if these damages exceed my security deposit.

\_\_\_\_\_ I have reviewed this agreement with the House Manager and my questions about it have been answered.

I release the Management and the house Resident Council from any liability related to the conditions of the agreement.

\_\_\_\_\_  
Resident, Print Name

\_\_\_\_\_  
Resident, Signature and Date

\_\_\_\_\_  
House Manager, Print Name

\_\_\_\_\_  
House Manager, Signature and Date