

– Assisted Living – Online Services & Amenities Checklist

Community: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Telephone: (_____) _____ Fax: (_____) _____
 Contact Name: _____ Email: _____

Instructions: Please review all 7 categories. Please indicate which service/amenities are available at your community by placing a checkmark next to the ones that are available **NOTE:** the Fees category, #7, **enter the lowest rate for all room sizes available.**
Completed form can be faxed to (800) 350-0771

** You can not add or rename items listed.**

1 Community Information

(Add check mark if item is available)

- ☐ Chapel / Chaplain Services
- ☐ Computer Room
- ☐ Convenience / Gift Store
- ☐ Covered Parking
- ☐ Fitness Center
- ☐ Game Room
- ☐ Guest Accommodations
- ☐ Hair Salon
- ☐ Indoor Pool
- ☐ Laundry Rooms
- ☐ Library
- ☐ Lounge Area
- ☐ Outdoor Areas
- ☐ Storage Areas

2 Apartment Features

(Add check mark if item is available)

- ☐ Semi Private Rooms
- ☐ Private Rooms
- ☐ Studios
- ☐ One Bedrooms
- ☐ Two Bedrooms
- ☐ 2 Bedrooms / 2 Bathrooms
- ☐ Building Type
hi-rise, ect: _____
- ☐ Cable TV
- ☐ Furnished Apartments
- ☐ Handicap / Barrier-Free
- ☐ Total Number of Units
of units / beds: _____
- ☐ Individual Climate Control
- ☐ Kitchenettes
- ☐ Patios or Balconies

Apartment Features - cont.

(Add check mark if item is available)

- ☐ Storage Areas in Apartment
- ☐ Pets Allowed
- ☐ Pet Limitations: _____
- ☐ CCRC
- ☐ Non Profit

3 Services

(Add check mark if item is available)

- ☐ Cafe Snack Area
- ☐ Housekeeping
- ☐ Housekeeping / Laundry
- ☐ Laundry
- ☐ Linen Service
- ☐ Multi-Lingual Staff
- ☐ Transportation

4 Medical Services

(Add check mark if item is available)

- ☐ 24-Hour Supervision
- ☐ Alzheimer Specialty
- ☐ Incontinence Care
- ☐ Medication Management
- ☐ Nurse Available
- ☐ Physical / Occupational Therapy
- ☐ Physician Services
- ☐ Podiatry Services
- ☐ Respite Care
- ☐ Speech Therapy

5 Activities

(Add check mark if item is available)

- ☐ Art Therapy
- ☐ Educational Classes
- ☐ Exercise Programs
- ☐ Game Room
- ☐ Intergenerational Programs
- ☐ Movies
- ☐ Music / Dance Programs
- ☐ Outdoor Activities
- ☐ Pet Therapy
- ☐ Scheduled Trips
- ☐ Social Activities
- ☐ Spiritual Programs

6 Meals

(Add check mark if item is available)

- ☐ Cafe Snack Area
- ☐ Daily Meals
of meals: _____
- ☐ Dietitian
- ☐ Kosher Diet
- ☐ Restaurant Style Dining
- ☐ Special Diets

7 Fees:

(Add check mark if item is available)

- ☐ Private Insurance
- ☐ Government Assisted
- ☐ Entrance Fee Required

** Enter the lowest rate for all room sizes available

Semi Private Rooms from \$ _____
 Private Rooms from \$ _____
 Studios from \$ _____
 One Bedrooms from \$ _____
 Two Bedrooms from \$ _____