

— Dunes House —

The purpose of the Dunes House, Inc. is to provide residential extended stay housing for male alcoholics (>18 years old). The mission is to aid the alcoholic in their recovery through the application of the principles of Alcoholics Anonymous, provide education on sober living, promote long term sobriety, and produce productive members of society.

This packet contains an application form, a questionnaire, and a Memorandum of Understanding.

If the client is accepted as a resident for the Dunes House, he will be required to sign the Memorandum of Understanding. This agreement includes the rent fee, the due date, and a statement that informs the resident he will be immediately evicted if he is intoxicated or chemically impaired at any time during residency.

Kindest Regards,

Walter Corlett, President

211 E. 6th Street, Michigan City, IN 46360 (219)879-5663

Dunes House

Application for Residency

Date: _____

Name: _____

Sobriety Date: _____

Current Address: _____

Current Phone Numbers: _____

Emergency contact person: _____

Address/Phone Number: _____

Social Security #: _____ Date of Birth: _____

Are you Employed? Yes ___ No ___ Name, phone #, & address of employer:

Do you own a car? Yes ___ No ___ Insured? Yes ___ No ___

Driver's License? Yes ___ No ___ Tags? Yes ___ No ___

Marital Status: _____

ARREST/LAWSUIT/ DUI	WHY	DATE STATUS (FINES, JAIL, OR STILL PENDING)

Do you have any children? _____ How many? _____

Referred by: _____

Referred by: _____

Dunes House

MEMORANDUM OF UNDERSTANDING

All rent from residents will be due each Friday of the week between 4:00 pm and 8:00 pm, at the rate of \$130.00 per week. The initial intake fee includes \$130.00 for the first week's rent, and a refundable \$50.00 security deposit, for a total of \$180.00.

You must pay by money order. You must make this payment to the Dunes House.

If you are not current with your rent, the first week you will be given a written warning and you will have ONE week to get your rent current. After the second week you will be subject to eviction.

In the event that you are intoxicated or chemically impaired while you are a resident at the Dunes House, you WILL BE EVICTED. The Michigan City Police Department will be called to escort you from the property if you do not immediately vacate the House. Your emergency contact person will be notified.

Emergency contact person: _____

Phone number: _____

Walter Corlett, President

Chris Jones, Resident Chairperson

I have received and agree to comply with this Memorandum.

_____ resident

211 E. 6th Street, Michigan City, IN 46360

219-879-5663

— Dunes House —

Resident Confidentiality Agreement

I _____ acknowledge and affirm that I will hold true to the principle that all members of the recovery community deserve and require the utmost of **discretion**, that our sobriety requires it. I do hereby affirm that I will honor the commitment to that end. Who, what or when anyone is at the Dunes House or attending any 12 Step meeting shall remain confidential.

Signature of Resident

Date

— Dunes House —

OVER THE COUNTER POLICY

The following is a list of approved over the counter items that are allowed in your personal area. All medication should be kept in the caretakers office, upon determination and not limited too the following:

- 1) Ibuprofen
- 2) Aspirin
- 3) Energy drinks
- 4) Sleepy Time Tea
- 5) Mouthwash (alcohol free only)
- 6) Vitamin C
- 7) Natural Root Extracts

The following is a list of banned items, which should be obvious. Again, no prescription medications of any kind are allowed in your area or common areas. Without the express permission of the President of the House Board:

- 1) Sleeping Pills
- 2) No Doze (or any similar)
- 3) Night time cold and flue medications
- 4) Sinus medications
- 5) mouthwash (Scope, Listerine, or any with alcohol)
- 6) Cough Syrup without approval
- 7) Any over the counter medications containing Acetaminophen
- 8) Any illegal or mind altering drugs. Again this should be obvious
- 9) Anything containing Alcohol
- 10) Certain Vitamins
- 11) Diet pills or any type of “truckers Friends”

Anything not on the approved list should be considered banned and subject to approval. The attempted conversion of a banned item (putting Valium in an aspirin bottle) will result in immediate removal from the property. Until a meeting of the Board of Directors and be convened to make a determination on your resident status.

Signature of Resident

Date

— Dunes House —

Resident Chore List

And

Description

General Residents Responsibility

All Residents are responsible at all times for the following, but not limited to:

- Keeping their bedrooms clean, vacuumed, beds made, debris and dust free
- Washing their own Dishes, Glassware and silverware
- Removing their personal hygiene supplies and towels after showering, etc
- Clean surface of stove after each personal use

All chores to be completed by 7:00 AM.

Each resident is responsible for assigned chore, if at work or on pass, it is your responsibility to secure another resident to perform that chore or chores. Failure to do so will be your consequence. Chores will be inspected between 7:00 AM and 8:00 AM daily.

Bathrooms - Down Stairs

- Clean and Disinfect Toilets, sinks, mirrors and surfaces daily
- Stock bathrooms with supplies
- Empty waste baskets and replace with new can liner daily
- Special attention is to be given to the ladies room
- Report any outage of supplies IE: towel rolls

Bathroom - Upstairs

- Shower stalls cleaned and disinfected every Sunday
- Floors* mopped Monday and Thursday
- Toilets, surfaces, sinks and mirrors cleaned and disinfected Monday and Thursdays
- Keep bathrooms supplies stocked
- Empty waste baskets and replace with new can liner as needed
- Report any outage of supplies IE: towel rolls

*Floors include both bathrooms, hall area from outside the bathroom to the front staircase

Porches

Residents Porch

- Vacuum including stairs every Sunday and as needed
- Keep trash cans emptied as needed
- Wash and clean out ashtrays as needed

Front Porch

- Sweep decking and steps daily
- Shake/beat entryway rugs daily
- Empty trash cans and replace with new liner daily
- *Winter - shovel steps and sidewalks to property line (telephone pole to gate walk way) and to street and to back door, salt as needed
- Vacuum stairs to meeting room

*Responsible resident to keep up with snow removal when of property, other's assist if responsible resident is working, this is a safety issue for all the residents.

Floors

- Mop kitchen, back porch, downstairs bathrooms and front vestibule daily with clean disinfected water
- Empty mop water in toilet DO NOT LEAVE DIRTY WATER IN BUCKET
- Store mop and bucket away

Half -Measures Room

- Vacuum daily
- Empty waste baskets and replace with new can liner daily and as needed
- Clean table surfaces daily
- Check couches and chairs for debris around seating area

Meeting Room

- Spot sweep daily
- Empty trash cans and replace with new liners
- Wipe down tables daily with disinfectant
- Place chairs appropriately
- Sweep/mop staircase from back porch to meeting room and vestibule to meeting room as needed
- Wipe coffee counter and sink with disinfectant
- Clean coffee machines and pots

Kitchen

- Wash cabinet surfaces every Sunday
- Wash refrigerator shelves and surfaces every Sunday
- Clean Counter top and stove surface once a day
- Wash pots, pans and utensils used for meals prepared for group
- Keep dishes, pots, pans, utensils and glassware stored appropriately
- Empty trash cans as needed
- Wipe back porch table with disinfectant and arrange chairs
- Scour sink daily, bleach every Sunday

Resident Chore List and Description

Signature Page

I _____ acknowledge that I have read, received and understood the Chore Description Manuel. I also understand the consequences as stated in the House Rules For Residents.

Signature of Resident

Date

— Dunes House —

211 1/2 East 6th Street Michigan City, Indiana 46360

(219) 879-5663

HOUSE RULES FOR RESIDENTS

The House Rules established for the residents of the Dunes House and detailed within this lodging agreement have been established as a means of protecting your best interests, as well as the best interests of the other residents, house members, guests, and the House/Dwelling known as The Dunes House. It must be understood that the Dunes House is most important, a safe place for aiding in the recovery of many alcoholically troubled people. If you place the House or its' reputation in jeopardy, you will be **EXPELLED!** Your **ATTITUDE** will be a great factor in determining your eligibility to remain in the House.

These rules cannot regulate every possible aspect of your stay at the House. They do represent the spirit of the relationship between the resident and the fellowship of the house. However, **THEY WILL BE ENFORCED!**

All prospective residents must have completed an alcohol treatment program, be properly detoxed, or have their physician sign off acknowledging you are in no immediate danger from the detox of alcohol. Properly detoxed will be defined as either from a medical facility, or incarceration with a drug and alcohol screen.

The maximum stay at the Dunes House will be subject to review.

The Resident Committee is here to guide you through your stay with us. They enforce all the rules that pertain to you; the resident. Your freedom is given and taken away by **YOUR** actions, through the Resident Committee. Utilize their experience, strength and hope.

1a. Medicine, including but not limited to; prescription medication, over-the-counter medication, and cough syrup containing alcohol; will be turned over to the Resident Chairperson or their designate. Prescription medications will be self administered according to the instructions of your doctor, under the supervision of the person in charge of the House. Drugs may not be your problem, but others might have this problem.*** Please, refer to hand out for defining what over the counter medications/vitamins are permitted to be in your possession/room.***

1b. Luggage will be checked for contraband by a member of the House Committee upon admission.

2a. Anyone found to have consumed or be in possession of unauthorized alcohol or drugs during their stay will be asked to leave immediately! This expulsion will be exacted without refund of rent money, NO EXCEPTIONS!

2b. If you are suspected of being under the influence of alcohol or any unauthorized substance, you will be asked to have a urine or Breathalyzer/ alcohol test immediately

2c. Handguns or lethal weapons are forbidden within the Dunes House, or grounds of the Property.

3a. ALL residents will attend at least one AA meeting a day. Signature of chairperson at the meeting required. Your reason for being here is to be in an environment surrounded by recovering people. Any deviation will be at the discretion of the Resident Committee. THIS REQUIREMENT WILL BE ENFORCED WHILE YOU ARE HERE.

4a. All residents will be up by 8 am. Exceptions will be when a work schedule conflicts, or authorized by appropriate personnel.

4b. One meal will be provided daily.

4c. All meals must be eaten at the dining area; (the table on the back porch on the 1st floor) or at the picnic table if the dining area is being used for a meeting. No snack or other food or drink will be allowed in the resident quarters. NO EXCEPTIONS!

4d. If food is discovered in unauthorized areas, residents will lose their upcoming weekend pass and/or privileges.

4e. The DUNES HOUSE is a NON SMOKING FACILITY. If you are caught smoking in the house you will lose pass and privileges. Length determined by resident Committee.

5a. Residents must be in the House by 10 pm. Sunday through Thursday and 11 pm. on Fridays and Saturdays. This is the curfew. This is one of the most common reasons for being expelled from the house. PLEASE TAKE NOTE!

5b. Residents may request an overnight stay 2 days in advance. A WRITTEN request is required in order to be considered. This written request must be given to the Resident Chairperson or his designate.

5c. Any time you are granted an overnight pass you must notify a caretaker or the person in charge before leaving. All residents must find someone to do their chore while on pass, and notify the caretaker or person in charge. If no one can be found to do your chore, advise the caretaker.

5d. ALL residents must fill out the sign-in, sign-out sheet upon entering or leaving the House with Name, Destination, Time In and Time Out. (Failure to fill out the sheet correctly will result in loss of passes and or privileges). Discretion of the Resident committee.

5e. Any out of town meeting or activities must be approved by the Resident Chairperson, or his designate, on an individual basis.

6a. Residents must be in their sleeping quarters one hour after curfew. No activities will be conducted downstairs after 11 pm, unless approved by the person in charge.

6/8/2018

6b. Residents may operate personal audio devices with headphones only, NO EXCEPTIONS; others may not like your music! Radios and tape players may be operated upstairs in this manner. The playing of AA tapes/CD's/DVD's is encouraged.

6c. All TVs in the House will be turned off during ALL meetings.

6d. There will be no personal TVs allowed in resident quarters this includes Computers used as TV's.

6e. The Dunes House Inc. provides everything necessary for residents to reside comfortably in their assigned room. Residence must submit for approval, to the house committee, any additions or changes to furnishings and /or appliances.

7a. Residents will not have visitors in their quarters. (Male visitors are allowed in the TV lounge.)

8a. All residents must keep their personal quarters clean. Periodic inspections will be performed. Violations will result in loss of privileges, and/or passes.

8b. Beds will be made upon awakening.

8c. All personal property must be stored properly; nothing left on the floor.

8d. Residents must be properly dressed, street attire, shoes, upon leaving their quarters, for any reason.

9a. Residents will perform house cleaning duties assigned by the Head Resident or the person in charge. These duties must be done between 10 pm. and 7 am. (See chore board for your duties)

9b. Chores will be checked by 7 am. daily by the resident Caretaker. If a chore is not completed at this time, and the person assigned cannot be found to do the chore, the caretaker will assign an alternate. At the earliest convenience they will discuss with the person originally assigned the chore why it was not done, and appropriate action will be taken.

10a. No visiting of a romantic nature will be allowed on the Dunes House property.

11a. The rent at DUNES HOUSE INC. will be payable on each Friday. No Exceptions.

12a. All residents must be paid one week in advance. Upon admittance, required rent and a fifty dollar (\$50.00) deposit is required. Two consecutive Fridays of nonpayment results in an eviction.

12b. For mid week arrivals, proration of rent, plus security deposit will be required for admittance. Full rent will be due on the Friday following the residents admittance date.

12b. Consideration for rent is to be paid by Money Orders only.

13a. Residents are expected to maintain personal hygiene. You do not live alone, and the rights of others will be respected!

14a. DUNES HOUSE INC. is NOT responsible for lost or stolen property. We discourage residents keeping large sums of money, expensive jewelry, etc.

14b. Locking up/securing personal items is prohibited during your stay at the Dunes House. This is for your safety, as well as the safety of your house-mates.

15a. Residents are prohibited from gambling on the Dunes House premises. There will be no visiting of the Blue Chip Casino or any other gambling institutions. (*exception: for employment, and it must be approved by the Resident Committee.)

15b. First shift” is the only employment that is allowed during your stay at the Dunes House.

15c. First shift is defined as; the shift of work while employed that does not conflict with the residents schedule as it pertains to the House Rules for Residents.

16a. The customary procedure for minor violations of the House Rules is:

- 1. Verbal warning**
- 2. Written warning**
- 3. Written warning**
- 4. Written Warning & 2 week suspension of passes and privileges**
- 5. Written Warning & 4 week suspension of passes and privileges**
- 6. Expulsion from the Dunes House**

PASSES AND PRIVILEGES DEFINED

I. Passes are limited to anything overnight, and requiring written approval.

II. Privileges are defined as: leaving the house for any recreational activities.

ONLY EXCEPTION'S TO LOSS OF PRIVILEGES

1. Work, or looking for work, subject to verification. 2. Legal appointments 3. Medical appointments 4. School 5. To attend a CLOSED, LISTED, CONFERENCE APPROVED AA meeting with their sponsor.

16b. This is the process of the Dunes House demerit system. Remember, you came to the Dunes House for help. This is the help the Dunes House is offering. Our role is to help You live life on life terms. Your role is follow the rules, no matter what You think. We realize that this new way of living can be stressful, so in the ideals of good behavior, a “written warning” expiration date policy is in place to help you get back on track as you trudge the road to happy destiny.

*****Written warnings have a “life term” of 3 months. ex. If a resident violates, and is served a “write up” on January 1st, the write up will expire on April 1st .*****

*****These measures are NOT a guarantee, they are warnings; your ATTITUDE is the key to your stay at the Dunes House. If the President and the Resident Chairperson sees fit, or the caretaker recommends, you can be expelled for ANY violation immediately!*****

17c. Stealing from fellow residents, members and guests and/or the house will be cause for immediate dismissal. This is a zero tolerance policy. Individuals will permanently lose future eligibility for re-admittance as a resident to Dunes House Inc.

17d. Fighting will not be tolerated. Any and all issues will be subject to Resident Committee review.

17e. If a resident consumes or uses alcohol/ illegal narcotics or abuses his own medication on Dunes House property, he will be banned for life as it pertains to the By-Laws. He will permanently lose future eligibility for re-admittance as a resident to Dunes House Inc.

17a. By signing this form you are consenting to taking a drug and alcohol test at the request of the person in charge, AT ANY TIME! If you are found to be positive, you will pay for the test, and be immediately expelled from the Dunes House with NO REFUND of your deposit. If the drop is negative, the house will pay for the test.

17b. By signing this form you acknowledge the “Rules For Residents” of DUNES HOUSE INC., and it is your responsibility to learn and abide by these rules.

(Keep a copy of the Rules for yourself!)

Date: _____

Resident (Print)

Resident (Signature)

_____ Date: _____ Resident

Committee Chairman Chris Jones

Dunes House Inc.

President

Walter Corlett

Revised 2/22/2010

Dunes House Inc.

Resident Committee Chairman

Chris Jones

— Dunes House —

Please fill out the following questionnaire completely. When you have finished call the office 219-879-1956 or 219-561-5096 to schedule an interview with the Resident Committee. An interview is required for residency.

A. PRESENT STATUS:

Are you willing to go to any length to get sober? _____

What was happening that prompted you to seek treatment?

Whose idea was it for you to apply to the Dunes House?

Describe your emotional state and feelings about living in a recovery house?

What problems do you want to work on while you live here?

Describe your long term goals. _____

Where and with whom were you living before treatment or coming here?

If your application is not accepted, where will you live?

Do you have any health problems that require special care on YOUR part?

If yes please explain: _____

Are you medically stable at this time? If no please explain:

Are you able to fully care for yourself and are you able to respond to life threatening conditions (smoke alarms, etc.)? If no please explain:

Have you been drug and alcohol free for 5 days? _____

Sober Date: _____

Do you consider yourself an alcoholic, addict, both, or none of these?

Give your own definition to explain your previous answer:

MEDICAL & PSYCHIATRIC HOSPITALIZATIONS		
FACILITY	DATE	DIAGNOSIS

B. TREATMENT HISTORY:

Did you leave against medical advice (AMA) at any of the above facilities?

Were any of the above admissions for suicide attempts?

How many times total have you tried to commit suicide?

Do you feel like hurting yourself now?

Do you have a suicide plan? If so, what is it?

B. TREATMENT HISTORY:

ALCOHOL/CHEMICAL DEPENDENCY TREATMENT		
FACILITY	DATE	DIAGNOSIS

Did you successfully complete your program at the above facilities?

Did you leave against medical advice at any of the above facilities?

Residential, detoxification, inpatient or out patient programs:

ALCOHOL/CHEMICAL DEPENDENCY TREATMENT		
FACILITY	DATE	DIAGNOSIS

Addictionist, social worker, therapists, psychiatrist, psychologist, clergy:

OUTPATIENT COUNSELING		
FACILITY/COUNSELOR	DATE	DIAGNOSIS/REASON

Are you currently being seen by any of the above?

Medical Care, doctors, nurse practitioners:

CURRENT MEDICAL CARE		
MEDICAL CARE PROVIDER	DATE	DIAGNOSIS/REASON

Are you currently being seen by any of the above?

What facility or treatment program was successful for you?

Have you used chemicals, including alcohol, to overcome physical or emotional pain and/or depression? If so, please list those medications:

C. VOCATIONAL/WORK HISTORY:

Occupation	Company	Start Date	End Date	Reason for leaving

List your employment history for the last 10 years:

Please describe the effects of drinking or drug use on your job:

D. CHEMICAL HISTORY

ALCOHOL:

How old were you when you had your first drink? _____

How old were you the first time you were intoxicated (drunk)? _____

How old were you when you first thought you might have a problem with alcohol? _____

Favorite alcoholic drink? _____

How many drinks did you have a day? _____

What time of the day did have your first drink? _____

Where and when did you usually drink? _____

Did you drink alone? _____

How often did you drink alone? _____

How long have you been able to go without drinking in the past?

When was this? _____

Why/how did you return to drinking? _____

Do you think you can control your drinking? _____

How long can you control your drinking? _____

When was your last drink? _____

When was your first contact with A. A.? _____

How many meetings do you go to a week? _____

Do you have a sponsor? _____

Do you have a home group? _____

What step are you on? _____

Which steps have you completed? _____

Did you do a 4th and/or 5th step? _____

DRUGS:

DRUGS YOU HAVE USED	AGE OF FIRST TIME YOU USED THE DRUG

How old were you when you first used drugs? _____

How old were you when you realized you had a problem with drugs? _____

What is your drug of choice? _____

How often did you use it? _____

How much did you use? _____

Where did use drugs? _____

Have you had an accidental overdose? _____ When? _____

What drug? _____

Have you tried to overdose on purpose? _____ When? _____

What drug did you use? _____

How long have you been able to go without using drugs? _____

What was the date you last used drugs? _____

Have you ever gone to N. A.? _____

If so when? _____ What steps did you complete? _____

E. FINACIAL :

Please estimate the amount of money you have spent on alcohol and drugs:

Estimate the amount spent dealing with the consequences of alcohol and

drug use in the past two years (loss of jobs, DUI, etc.) _____

F. FAMILY BACKGROUND

Describe your family's attitudes toward drinking and drug use: _____

Did/do any of the above family members use alcohol and/or drugs? _____

When and with what effect? _____

Have you lost the love and/or support of family and friends due to your

drinking or drug use at any time? _____ Describe: _____

Please make any other comments or share information that may help us get

to know you better: _____

Are you willing to go to any length to get sober? _____

NOTE: A personal interview will be required prior to acceptance as a resident of the Dunes House, Inc. Please call 219-879-1956 or 219-561-5096 to schedule your interview and complete all the questions in this packet before the interview.

— Dunes House —

Office Signature Page

Acknowledgment of receipt of Memorandum of Understanding

_____ Date: _____

Resident (Print)

Resident (Signature)

_____ Date: _____

Resident Committee Chairman

Chris Jones

Walter Corlett

President

Chris Jones

Resident Committee Chairman

Revised 10/24/2017

6/8/2018

— Dunes House —

Resident Chore List and Description

Signature Page

I _____ acknowledge that I have read, received and understood the Chore Description Manual. I also understand the consequences as stated in the House Rules For Residents.

Signature of Resident

Date

Revised 10/24/2017

Revised 5/17/2018