

New Hope Recovery Houses

RENTAL AGREEMENT

I, _____ Acknowledge New Hope Recovery, LLC is a recovery based living facility. I have been provided with house rules and expectations, and I understand that my residency is based entirely on my ability to follow these rules. I understand that it is my responsibility to read and understand all house rules, and to familiarize myself with New Hope Recovery, LLC Policies.

I further acknowledge that I am a “Tenant at Will” and that this means that New Hope Recovery management or myself can terminate tenancy at anytime.

I understand failure to follow the rules, or using drugs or alcohol may result in New Hope Recovery management terminating my residency immediately, and no refunds will be given.

I understand that if I move or I am evicted from New Hope Recovery property and owe a balance, my belongings are forfeited to New Hope Recovery until my balance is paid in full.

New Hope Recovery reserves the right to evaluate each individual circumstance.

Resident signature _____ **Date** _____

Manager signature _____ **Date** _____