

It is understood by the representative(s) of the organization seeking accreditation with the Missouri Coalition of Recovery Support Providers (MCRSP) that MCRSP 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 accreditation with MCRSP assumes all liabilities for any misrepresentations.

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

1. The organization requesting accreditation with MCRSP is a legally recognized entity within the state of Missouri and meets all legal expectations of such entities: reporting, maintaining records, providing financial data, etc.
2. The organization requesting accreditation with MCRSP 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 accreditation with MCRSP has State of Missouri Incorporation Documents.
4. The individual facilities to be listed with MCRSP meet all federal, state and local ordinances and building codes required for residential or institutional buildings.
5. The facilities to be listed with MCRSP 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 MCRSP 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 MCRSP 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 MCRSP 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 (as applicable).
10. The organization that manages the facilities maintains appropriate insurance.

Name of owner/managing organization: _____

Headquarters Address: _____

List names and addresses of facilities for which the organization is seeking accreditation with MCRSP:

1. _____
2. _____
3. _____

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: _____