## Safe Homes Case Management Form

SECTION A - Case Information	Date Form Completed:					
Name(s):	DOB:		Address:			
Agencies / Individuals Present:						
Additional Comments / Information:						
ECTION B - Existing Hazards &/or Violat	ions					
Hazards / Violation(s) Identified	Date Identified	Order Issued (if applicable)	Issuing Agency (if applicable)	Remediation Deadline	Date Remediated	Remediation Verified By
Additional Comments / Information:			1	1	<u> </u>	<u> </u>

For questions regarding usage, implementation &/or adaptation of this form please contact Captain Meghan Manke at <a href="manke@newingtonct.gov">mmanke@newingtonct.gov</a>

## **SECTION C – Goals & Objectives**

Immediate & Short Term Goals - Pose imminent risk / Must be completed to achieve compliance

Target Completion Date	Actual Completion Date	Verifying Agency
	Target Completion Date	Target Completion Date  Completion Date

Additional Comments:			

Lang Tawa Cools Many not be required by code but many improve quality of life / Ourging comment considerations for bookto and enfots because

Long Term Goals – May not be required by code, but may improve quality of life / Ongoing occupant considerations for health and safety hazards

Objective	Target Completion Date	Actual Completion Date	Verifying Agency
1.			
2.			
3.			
4.			
5.			
6.			
7.			

<b>Additional</b>	Comments:	
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## **SECTION D - Schedule for Inspection & Follow Up**

Date Hazards/ Violation(s)	Date Case Management Form &	Re-inspection by Code Enforcement		Date all Violation(s)/	Post-Remediation Follow Up By		
Identified	Agreement Completed	Date(s)	Agency/ Initials	Hazards(s) Remediated	Months & Initial	Months & Initial	Months & Initial

## Safe Homes Case Management Agreement

In orde	er to address the violatio	ns and/or hazards present at	(address), we,
		(occupant/s),	( <i>enforcement</i> ), and
		(support services) agree to the fo	ollowing:
1.	The occupant(s) agrees identified and discusse	to maintain his/her/their unit in compliance w d under SECTION B.	vith the health and safety requirements
2.	The occupant(s) agrees by SECTION C.	to work towards the goals identified within SE	ECTION C, within the timeframes set forth
3.		stand that failure to meet the goals and objectional enforcement action.	ives identified within SECTION C may result
4.		and support services representative(s) agree to hin SECTION C in the following ways:	o assist the occupant(s) in working towards
	a.		
	b.		
	C.		
	d.		
5.	•	to the "Schedule for Inspection and Follow Up" lved agree that re-inspection will be conducted	
		(enforcement agency), and that	
	ру	(name/s) from	(department name).
6.	(SECTION D), all individ	a change or cancellation must be made to the uals and/or agencies involved must be notified UST be rescheduled for a date/time within one	at least 24 hours in advance. The
7.			
8.			
Signat	ures:		
Occup	ant(s):		
Code E	Inforcement Representat	tive(s):	
Suppo	rt Services Agency Repre	sentative(s):	