

- 4. Please describe the reason for your inability to meet the requirements of the rule.

- 5. Describe and attach documentation of the plan and timeframe needed to meet requirements.

- 6. Additional materials:
 - Safety plan attached
 - Bid/estimate for a licensed contractor with timeframe for completion attached.

Disclaimer: This exception must not impact the independence or safety of any current or newly admitted resident.

Operator's Signature: _____ Date: _____

<p>Completed by ACHP Personnel:</p> <p>Is licenser granting exception: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>List reason for granting exception:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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