

# HELPING YOU CHOOSE YOUR RETIREMENT HOME



	Residence 1	Residence 2	Residence 3
	Check for YES	Check for YES	Check for YES
<i>Suites</i>			
Variety of Suite Sizes and Layouts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attractive Neutral Décor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Bathroom:</i>			
Safety bars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No slip flooring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Flooring:</i>			
Carpet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hardwood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Linoleum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No slip flooring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Windows:</i>			
Light - plenty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
View - good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Draperies included	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedding included	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Storage:</i>			
Counter space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Closet space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Privacy/Security Features:</i>			
Deadbolt Lock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Call System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire and/or Smoke Alarm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Convenient Electrical and Cable Outlets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individually Controlled Heating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individually Controlled Air-Conditioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electricity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cable TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well-Lit Hallways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distance from elevators, amenity space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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<i>Services Available</i>			
Maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housekeeping – Weekly or Daily Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Linen Laundry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Towel Laundry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Laundry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreation Program & Physical Fitness Programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24-Hour Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For Residence Outings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the Company Involved in Volunteer Opportunities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Health Care Services</i>			
Friendly Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Consultation for Healthcare Plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24-Hour Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication taken to Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pharmacist Consultation Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visiting/On-call Physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Option to use own Physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Memory Care Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vacation or Convalescence Stays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visiting Dental Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visiting Lab Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foot Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hearing Clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visiting X-ray/Ultra Sound Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private Nursing Available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	Residence 1	Residence 2	Residence 3
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<i>Dining Service</i>			
Meals Included in Monthly Fee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Optional Meal Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guest Meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meals for Special Diets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Room Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attractive Dining Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Private Dining Room/Area for Guests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Full Table Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Choice of Menu Items	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon Refreshments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening Refreshments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Amenities</i>			
Parking:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indoor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visitors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fee for Parking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spiritual Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Barber/Beauty Salon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lounges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exercise Classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Laundry Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Guest/Vacation Suites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newspaper Delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mail Delivery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outdoor Space – Walking areas, gardens, decks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crafts Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Games Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air-Conditioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire/Smoke Alarms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sprinkler System Throughout	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patio and/or Gardens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pet-Friendly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	Residence 1	Residence 2	Residence 3
	Check for YES	Check for YES	Check for YES
<i>Residence Information</i>			
Resident Newsletter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Reputation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well-Established	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Centrally-Located	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Close to Shopping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Close to Places of Worship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Close to Health Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well-Served by Public Transit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendly Residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resident Association/Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Waiting List	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stable Ownership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Pricing</i>			
Good Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agreeable Terms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost of Suite	\$	\$	\$
Cost of Extra Services You Require	\$	\$	\$
TOTAL per MONTH	\$	\$	\$