



Arbutus Park Retirement Community offers various levels of living for senior citizens age 62+ without regard to race, color, national origin, ancestry, age, gender, gender expression, marital status, religion, handicap, or disability. More than 300 seniors currently reside on the campus which includes both independent living and our nursing home – Arbutus Park Manor.

Independent Living at Arbutus Park

MAIN CAMPUS

Single Cottages and Patio Home Cottages are located along Wesley Drive and Otterbein Lane; expanded patio homes are located on Nadona Avenue. Townhouses sit along Kissell Lane and Jacob Albright Drive on the grounds of the Community. All cottages and townhouses consist of two bedrooms, kitchen, living room and garage. All units vary in square footage and the number of baths. The unit cost ranges from **\$120,000 to \$170,000**.

The 2023 monthly association fee of \$500 covers general outside maintenance of the cottage, grass cutting, snow removal, garbage service, upkeep of the physical structure, liability/homeowner's insurance and all real estate/school taxes. This fee also covers the appliances, servicing of the appliances, and electrical and plumbing services. *(The service fee is reviewed on an annual basis.)*

PARKER RIDGE

Parker Ridge is a recently developed site, and part of the Arbutus Park continuing care retirement community. Located on Canterbury Way, the development has 13 cottages that range from 1,200 - 1,650 square feet. The unit cost ranges from **\$180,000 to \$280,000**.

The 2023 monthly association fee of \$600 covers general outside maintenance of the cottage, grass cutting, snow removal, garbage service, upkeep of the physical structure, liability/home owner's insurance and all real estate/school taxes. This fee also covers the appliances, servicing of the appliances, and electrical and plumbing services. *(The service fee is reviewed on an annual basis)*

Frequently Asked Questions

How old must I be to join the Arbutus Park Retirement Community?

Independent residents must be at least 62 years old.

How does the independent payment process work for continuing care at Arbutus?

Retirement living at Arbutus Park assures residents nursing care when, and if, it is required, either on a temporary or permanent basis. Residents are guaranteed the next available bed once we have been notified. Independent living residency investment is amortized over 10 years. The equity credit received towards nursing care is equal to 90% of your total investment less 10 % per year for the number of pro-rated months the resident occupies a cottage. After the 120 month period - 10 years - has passed, the resident may remain in the cottage as health permits. Upon entering the nursing home the resident begins paying the prevailing per diem rates and service charges.

Are meals available for independent residents?

Arbutus Park offers independent living meal service. There is no meal plan that is required to purchase. It is as simple as picking up the phone and placing the order! The meal can be delivered to the front door hot and fresh or the meal can be served at the manor in our independent dining room.

Below are 2023 meal costs which are billed on a monthly basis.

Resident Meal Rates: Lunch- \$8.00 Dinner – \$6.00 Breakfast – \$6.00

What services are available to residents?

Below are services offered to our residents:

- | | | | |
|-------------------------|--|----------------------|--------------------|
| - activity programs | - gift shop | - barber/beauty shop | - community center |
| - chapel | - social services | - therapy | - housekeeping |
| - dietary/food services | - 24 hour professional skilled and intermediate nursing care | | |

Is transportation available?

Scheduled van service is available to independent residents for medical appointments for a \$20 fee.

Continuing Care Levels at Arbutus Park Manor

PERSONAL CARE

The Personal Care units are for ambulatory persons. Each consists of a separate room with a private bath. Cable TV hookups, and phone jacks are in place and offered at the resident's expense. All residents have Wi-Fi accessibility. All meals are provided in the main dining room. **The room/board rate is \$180/day/person.**

Suites, which include an additional room, are also available:

Suite Single Occupancy - **The room/board rate is \$220/day/person.**

Suite Double Occupancy - **The room/board rate is \$145/day/person.**

NURSING CARE

Twenty-four hour skilled and intermediate care is provided in the Nursing Facility by qualified personnel. The rooms are either private with private bath or semi-private with an interconnecting bath. **Room/board rates are \$360/day/person for a private room and \$340/day/person for a semi-private room.** Podiatrist services, medications, and personal laundry are some examples of additional costs.

DEMENTIA AND MEMORY CARE

A specialized care unit, Crossroads, with 24-hour nursing care is available for persons with Alzheimer's or related dementia. It provides a secure setting with door alarms and a locked entrance. There is also a fenced outdoor area with a patio where residents can sit or walk as weather permits. Daily therapeutic activities geared to various levels of dementia are provided, and all staff are trained for the special care needs of the residents. **The room/board rates are \$390/day/person for a private room and \$370/day/person for a semi-private room.**

SHORT TERM THERAPY

provides comprehensive therapy programs and services to our residents as well as the general public. Arbutus is committed to providing quality, individual focused health care and setting the standard for excellence in rehabilitation.

Visit ArbutusParkManor.com for more information and more frequently asked questions.

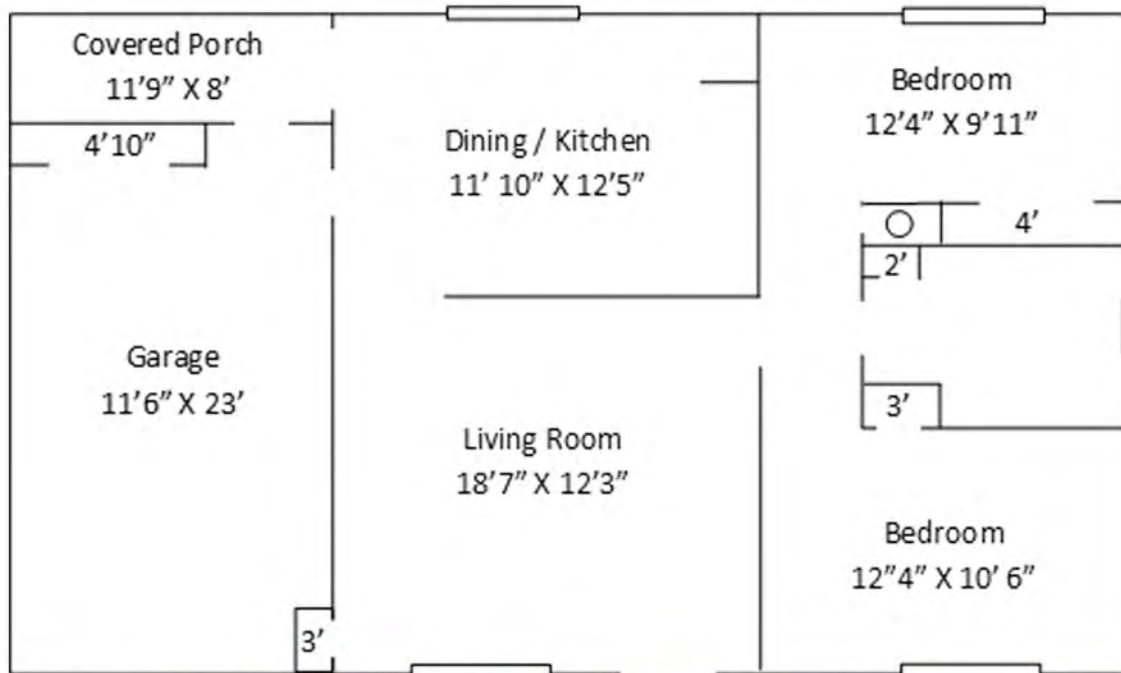




PATIO HOME: Example Floor Plan

Starting Price of \$120,000

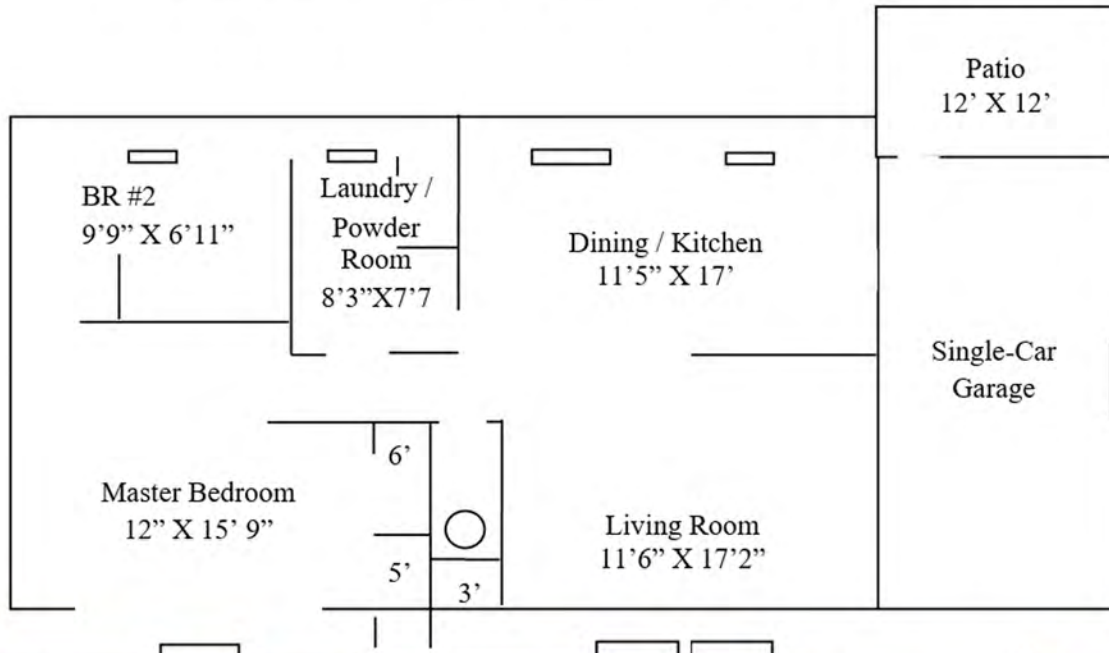
Approximately 660 square feet of living space and 1,000 square feet overall. 2 bed with 1 bath. Electric baseboard heat & AC.



Main Campus SINGLE COTTAGE: Example Floor Plan

Starting Price of \$155,000 (Parker Ridge pricing and square footage varies greatly.)

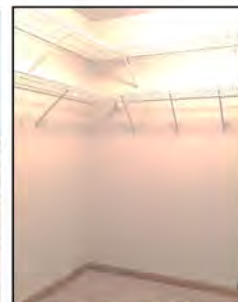
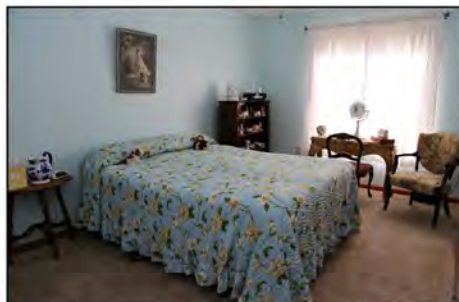
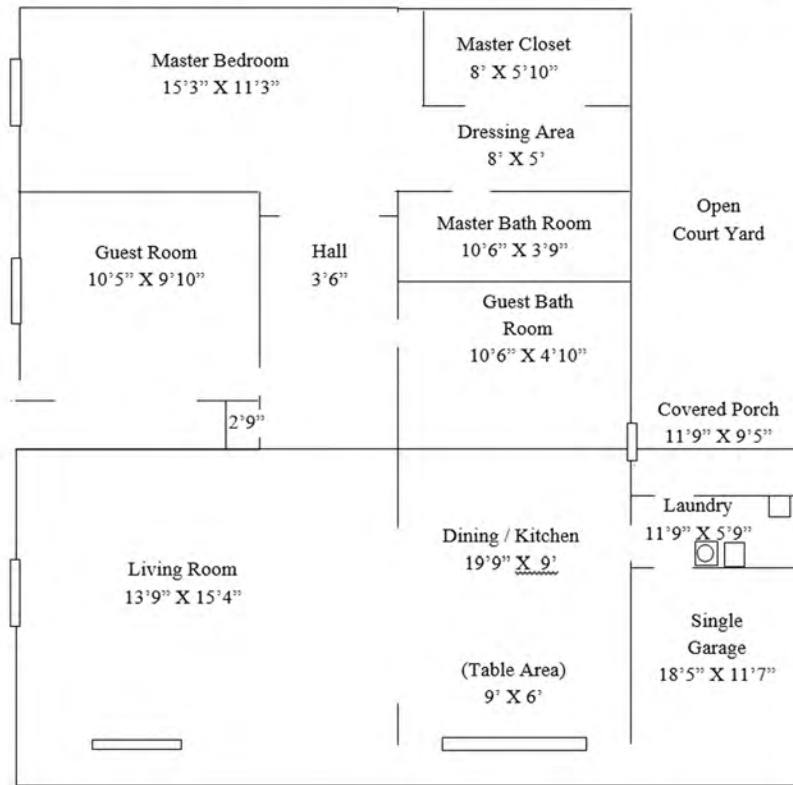
Range between 800 and 1,300 square feet of living space and 1,000-1,500 square feet overall. 2 bed with 1/1.5/2 bath.



TOWNHOUSE: Example Floor Plan

Starting Price of \$155,000 - Resident chooses flooring.

Approximately 1,200 square feet of living space and 1,400 square feet overall. 2 bed with 2 bath. Radiant floor heat & AC.



INDEPENDENT LIVING - PERSONAL CARE - NURSING CARE
SHORT TERM THERAPY - DEMENTIA & MEMORY CARE



UTILITY INFORMATION & ESTIMATES

Main Campus – Single Cottage (Double Occupancy) Utilities Estimate

- Electric - \$190.81/month (\$2,289.72 a year)
- Highland Sewer & Water - \$52.37/month (\$25.32- Water, \$27.05 Sewer) (\$628.44 a year)
- Johnstown/Windber Sewage - \$17/month (\$204 a year)
Some units do not have this bill.
- Monthly Association Fee - \$500/month (\$6,000 a year)

Main Campus – Patio Home (Double Occupancy) Utilities Estimate

- Electric - \$60/month summer; \$240/month winter (\$1,800 a year)
- Highland Sewer & Water - \$28.11/month (water only) (\$337.32 a year)
- Johnstown/Windber Sewage - \$17/month (\$204 a year)
Some units do not have this bill.
- Monthly Association Fee - \$500/month (\$6,000 a year)

Main Campus – Townhouse (Double Occupancy) Utilities Estimate

- Electric - \$54.91/month (\$658.92 a year)
- Gas - \$44.47/month (\$533.64)
- Highland Sewer & Water - \$31.58/month (\$378.96 a year)
- Johnstown/Windber Sewage - \$17/month (\$204 a year)
Some units do not have this bill.
- Monthly Association Fee - \$500/month (\$6,000 a year)

Parker Ridge – (Double Occupancy) Utilities Estimate

- Electric - \$71.40/month (\$856.80 a year)
- Gas - \$31.63/month (\$379.56 a year)
- Highland Sewer & Water - \$48.10/month (\$577.20 a year)
- Monthly Association Fee - \$600/month (\$7,200 a year)

Garbage is included in the monthly association fee.

Residents will need to switch utilities over to their campus address prior to moving.

It is the resident's responsibility to contact the above utilities to discuss the move/transfer process and date.

Estimates do not include cable, internet, or phone service. Most residents have Atlantic Broadband for cable/phone/internet. Dish is permitted if it can be mounted on a pole in the yard- no roof installs are allowed.

Residents are encouraged to get Renters' Insurance for contents, we insure the structure.

Estimates provided are from data collected from current residents.



Confidential Independent Living Application

The following confidential application is part of the application for residency at Arbutus Park Retirement Community. Please complete all sections by printing legibly or typing. This document is incorporated in and made a part of the Residential Agreement. The provider will rely on the Resident's statement made on this form. The resident warrants that all statements made herein are true and complete. A prospective resident may be asked to update this application closer to taking occupancy.

Date of Application _____

Name of first resident _____

Date of Birth _____

Name of second resident _____

Date of Birth _____

Address _____ City _____ State/Zip Code _____

Home Telephone Number _____ Cell number _____ Email _____

What County & State do you have legal residence? _____ Are you: ☐ Married ☐ Single ☐ Separated ☐ Divorced ☐ Widowed

Are you a veteran or spouse of veteran: ☐ Yes ☐ No If so, which branch and years served _____

Do you smoke? ☐ Yes ☐ No We are a smoke free campus.

Will you bring a pet? ☐ Yes ☐ No If so, what kind of pet _____ Were you referred by a resident? ☐ Yes ☐ No By whom? _____

Name(s) of children/responsible party

Address

Telephone number:

Email:



Name(s) of POA, Guardian/Conservator	Address	Telephone number:	Email:
_____	_____	_____	_____
_____	_____	_____	_____

Desired Cottage Type

Type of cottage desired: Please list in order of preference. (*Patio Home, Single Cottage, Townhome, Parker Ridge*)

1. _____	3. _____
2. _____	4. _____

Required Insurance

First Resident Name _____	Medicare Number _____
Supplemental Medical Insurance Company _____	Policy Number _____
Personal property/Liability/Tenant's/Homeowner's Insurance Company _____	Policy Number _____
Second Resident Name _____	Medicare Number _____
Supplemental Medical Insurance Company _____	Policy Number _____
Personal property/Liability/Tenant's/Homeowner's Insurance Company _____	Policy Number _____



Financial Statement

Resident 1: _____

Resident 2: _____

(If co-residents with resources separate each resident should fill out their own Financial Statement)

APRC must be satisfied that your resources are sufficient to last your lifetime. It may be necessary to draw from your capital funds to pay increased monthly charges. This is important for your protection and for the protection of the community. This financial statement is a part of the Confidential Resident Application which is made a part of the Residential Agreement. You warrant that all statements herein are true and correct.

****Please attach documentation to support the information provided herein.***

Please indicate with X if amount is Joint or is applicable to only Resident 1 or Resident 2.

Assets/Investments	Amount	Joint	Res 1	Res 2		Monthly Income	Amount	Joint	Res 1	Res 2
Cash, Checking, Savings, CDs					➤	Interest from asset on left				
Stocks/Equities (non-IRA)					➤	Dividend from asset on left				
Bonds/Fixed Income (non-IRA)					➤	Distribution from asset on left				
IRAs					➤	Distribution from asset on left				
Real Estate (primary)						Pension *specify amt under Res 1 & 2				
Real Estate (other)						If Pension transfer to spouse, amount				
Life Insurance: Death benefit						Other (describe)				
Life Insurance: Cash Value										
Other (describe)						Other (describe)				
Total Assets/Investments						Social Security *specify amt under Res 1 & 2				

Other Funds	Amount	Joint	Res 1	Res 2		Monthly Distribution (if applicable)	Amount	Joint	Res 1	Res 2
Annuities					➤	Distribution from fund on left				
Trust Accounts					➤	Distribution from fund on left				
						Total Monthly Distributions				

Liabilities	Amount	Joint	Res 1	Res 2		Expenses	Amount	Joint	Res 1	Res 2
Mortgage						Long Term Care Insurance				
Line of Credit						Health Insurance				
Loans						Prescriptions				
Other (describe)						Other (describe)				
Total Liabilities						Total Expenses				
Net Assets (Total Assets less Liabilities)										



If this statement is made on behalf of two individuals occupying a cottage, will the pension income change if one individual predeceases the other?

☐ Yes ☐ No

Please list your Bank(s) name

Bank Location

*If applicable, please provide the name of your Trust Officer. The Provider reserves the right to verify the provisions of your trust, which may affect your income or your ability to access capital funds.

Do you have long term care insurance? ☐ Yes ☐ No If yes, what is the coverage? _____

**Please provide copy of the provisions of your policy.*

I have transferred property for less than fair market value in the last 5 years. ☐ Yes ☐ No

If yes, please explain. _____

APRC seeks to ensure the safety and welfare of all residents within our community. As part of the application process, APRC shall provide you with a “Criminal Background Check Authorization” form (“CBC Authorization”), which CBC Authorization you shall complete and submit along with this application for residency. The CBC Authorization form shall authorize APRC to request a Pennsylvania state criminal history record and, if applicable, a federal criminal history record on your behalf at the expense of APRC. (NOTE: If the applicant, after undergoing an initial criminal background check, is approved by APRC to and have no available cottages, then in that event, the applicant shall complete and submit to APRC an additional CBC Authorization form and undergo a subsequent criminal background check at such time that a cottage becomes available and the applicant indicates that he/she is ready to accept occupancy of the applicable accommodation.)

I hereby declare that all statements herein are true and complete according to my best knowledge and belief. Declare assets and income will be available for use for payments of fees associated with expense generated by living at APRC. In witness whereof I have hereunto set my hand to this application.

Attest: _____ Date: _____ Applicant: _____ Date: _____

Attest: _____ Date: _____ Co-Applicant: _____ Date: _____

