

Board Meeting (Time approximate following City Council meeting which starts at 6:00 p.m.)

A. Welcome & Roll Call

B. Public Comment

(This is an opportunity to address the Riverdale Redevelopment Agency regarding your concerns or ideas. Please try to limit your comments to three minutes.)

C. Presentations & Reports

D. Consent Items

1. Consideration to approve meeting minutes from:

August 19, 2025 RDA Board Meeting and Work Session

E. Action Items

1. Public Hearing to receive and consider comments regarding amendment of the West Bench Redevelopment Project Area budget to provide for 80% tax increment participation over a 20-year period, not to exceed \$45,591,683.
2. Consideration of Resolution #R2025-07 amending the West Bench Redevelopment Project Area budget to provide for 80% tax increment participation over a 20-year period, not to exceed \$45,591,683.
3. Consideration of Resolution #R2025-08 adopting and implementing an Independent Living Policy for the Senior Center apartment facility.

F. Comments

G. Adjournment

In compliance with the Americans with Disabilities Act, persons in need of special accommodation should contact the City Offices (801) 394-5541 X 1232 at least 48 hours in advance of the meeting. The Public is invited to attend RDA Meetings.

Certificate of Posting

The undersigned, duly appointed City Recorder, does hereby certify that the above notice and agenda was posted on this 12th day of September at the following places: 1) the Riverdale City Hall Noticing Board, 2) the Riverdale City Website at <http://www.riverdalecity.com/>, 3) the Public Notice Website: <http://www.utah.gov/pmn/index.html>

Michelle Marigoni
Riverdale City Recorder



Minutes of the Work Session of the Riverdale City RDA (Redevelopment Agency) held Tuesday, August 19, 2025, held immediately following the Regular City Council Work Session at 5:30 pm, at the Civic Center, 4600 S Weber River Dr., Riverdale City, Weber County, Utah.

Present: Board Members: Braden Mitchell, RDA Chairman

Alan Arnold

Bart Stevens

Michael Richter

Stacey Haws

Anne Hansen

City Employees: Steve Brooks, RDA Executive Director
Brandon Cooper, RDA Deputy Executive Director
Casey Warren, Police Chief
Michelle Marigoni, Agency Secretary

Excused:

Visitors:

A. Welcome & Roll Call

The RDA Board work session began at 5:45 p.m. Mr. Mitchell called the meeting to order and welcomed all in attendance and stated for the record that all board members were present.

B. Public Comment

C. Presentations and Reports

D. Consent Items

1. Consideration to approve meeting minutes from August 5, 2025 RDA Board Meeting and Work Session.

Chairman Mitchell asked if there were any changes to the minutes. There were none.

E. Action Items

1. Consideration to move into closed session

This item was not needed.

Comments

Adjournment

Having no further business to discuss, the work session was adjourned at 5:46 p.m.

Date Approved:



Minutes of the Regular Meeting of the Riverdale City RDA (Redevelopment Agency) held Tuesday, August 19, 2025, held immediately following the Regular City Council Meeting at 6:00 pm, at the Civic Center, 4600 S Weber River Dr., Riverdale City, Weber County, Utah.

Present: Board Members: Braden Mitchell, RDA Chairman

Alan Arnold

Bart Stevens

Michael Richter

Stacey Haws

Anne Hansen

City Employees: Steve Brooks, RDA Executive Director

Brandon Cooper, RDA Deputy Executive Director

Casey Warren, Police Chief

Michelle Marigoni, Agency Secretary

Excused:

Visitors: Sterling Bennion

A. Welcome & Roll Call

The RDA Board meeting began at 6:39 p.m. Mr. Mitchell called the meeting to order and welcomed all in attendance and stated for the record that all board members were present.

B. Public Comment

Sterling Bennion has lived in Riverdale for almost 40 years. He thanked police and said they can go from nothing to life-threatening moments in no time. On 1150 West there are a lot of bushes and trees, the cars coming from South Weber Drive can't see the cars coming from 1150 west. The bushes need to be trimmed.

Steve Brooks said he would follow up and send code enforcement and public works to see what they can do.

C. Presentations and Reports

D. Consent Items

1. Consideration to approve meeting minutes from August 5, 2025 RDA Board Meeting and Work Session.

Chairman Mitchell asked if there were any changes to the minutes. There were none.

MOTION: Board member Arnold moved to approve the meeting minutes. Board member Haws seconded the motion. There was not any discussion regarding this motion, which passed unanimously.

E. Action Items

1. Consideration to move into closed session

This item was not needed.

Comments

Adjournment

MOTION: Having no further business to discuss, Board member Arnold made a motion to adjourn. The motion was seconded by Board member Richter and all voted in favor. The meeting was adjourned at 6:45 p.m.

Date Approved:

DRAFT



TRANSMITTAL

Body: Redevelopment Agency

Topic: **West Bench RDA Budget Amendment**

Department: Community Development

Director: Brandon Cooper

Staff/Presenter: Brandon Cooper

Contact: bcooper@riverdalecity.com

Executive Summary

The West Bench Project Area Plan (the “**Plan**”) was adopted by the Agency on May 10, 2005, pursuant to Resolution. No. R11-2005, and such Plan was subsequently adopted by the Riverdale City Council pursuant to Ordinance No. 644 on May 10, 2005.

The West Bench Project Area Budget (the “**Budget**”) was approved by the taxing entity committee on October 25, 2012, pursuant to Resolution No. TEC 2012-01, and such Plan was subsequently adopted by the Agency pursuant to Resolution No. R2012-07 on October 30, 2012.

The Budget was amended by the taxing entity committee (“**TEC**”) on September 26, 2019, pursuant to Resolution No. TEC 2019-02, amending the tax collection period to begin with any year from 2020 to 2025; and such Budget was subsequently adopted by the Agency pursuant to Resolution No. 2019-03 on November 6, 2019.

On March 21, 2024, the Agency notified the Weber County Assessor’s office of the Agency’s desire to begin the tax increment collection period for the West Bench RDA on January 1, 2025.

A minor amendment to the Budget was approved by the Agency on December 21, 2021, pursuant to Resolution No R2021-05, extending the Project Area from 15-years to 17-years, subject to Utah Code 17C-1-416.

The Budget was amended by the TEC on August 13, 2025, pursuant to Resolution No. TEC 2025-01, allow for eighty percent (80%) participation of tax increment revenue for a period of twenty (20) years, commencing with tax year 2025 and concluding with and inclusive of tax year 2045, with a maximum amount collectable not to exceed \$45,591,683.



TRANSMITTAL

The Agency now seeks to amend the Budget to reflect the same revised tax increment collection period and participation rate, specifically to allow for eighty percent (80%) participation of tax increment revenue for a period of twenty (20) years, commencing with tax year 2025 and concluding with and inclusive of tax year 2045, with a maximum amount collectable not to exceed \$45,591,683.

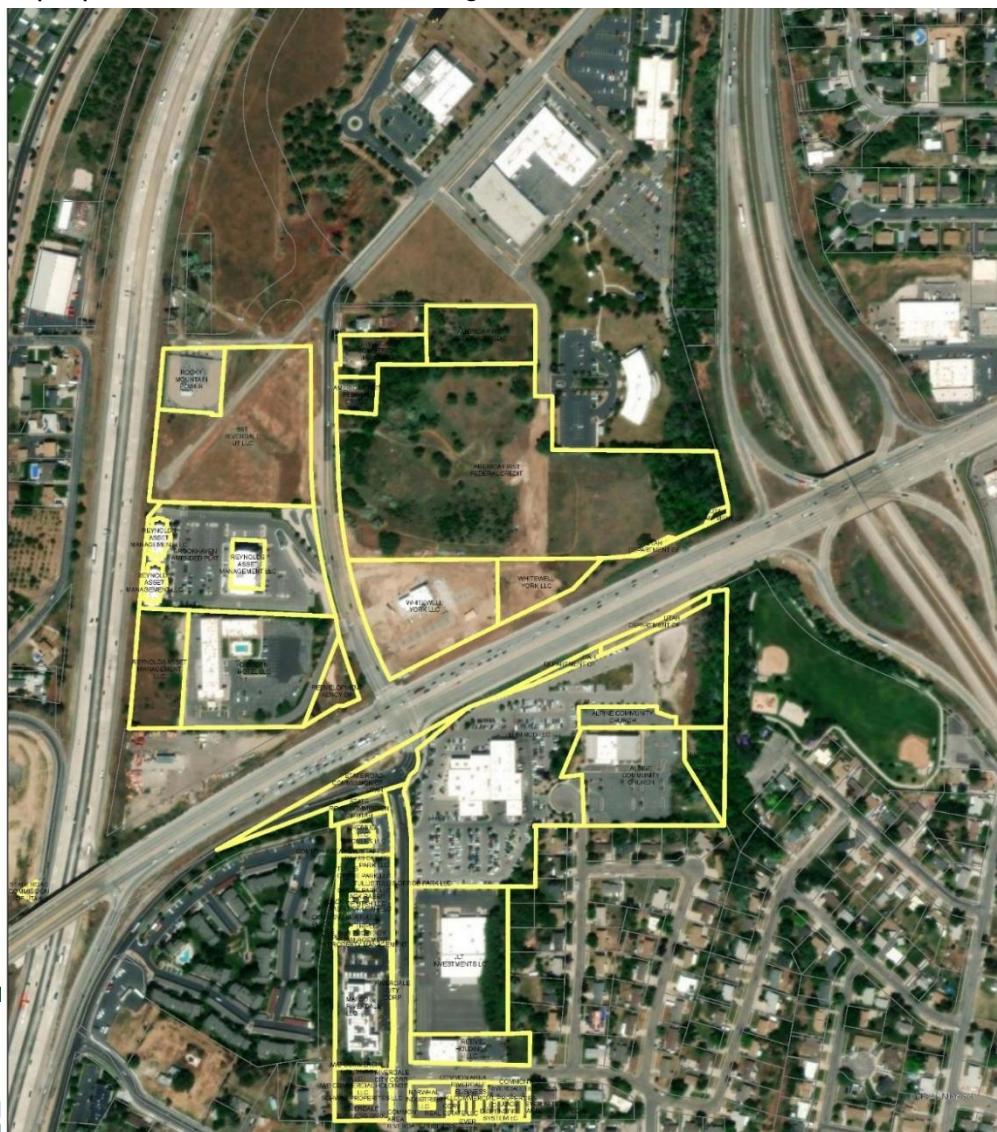
The Receipt by the Agency of tax increment revenues from the Project Area from annual taxes collected shall be 100% for the tax year 2025 and shall extend through tax year 2045 at 80% collection with a maximum amount collectable not to exceed \$45,591,683 and a maximum cap from each entity as described in the amended budget.

Requested Timeline:

Redevelopment Agency Meeting – Public Hearing – September 16, 2025

Potential Actions:

Following the presentation and public hearing, Staff recommends the Agency Board approve the proposed West Bench RDA Budget Amendment.





TRANSMITTAL

Attachments

Amended Budget
TEC Resolution 2025-1
Attorney Certification
Agency Resolution

WEST BENCH RDA
Property Tax - AMENDED BUDGET
Weber County

WEST BENCH RDA
Property Tax - AMENDED BUDGET
Wasco County

第10章

| | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------|----------------------|---------------|---------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|------------------|------------------|------------------|------------------|------------------|
| Webster Basin Water | 9,774,000 | 1,301 | 1,301 | 1,513 | 1,513 | 5,644 | 9,629 | 10,496 | 10,496 | 14,971 | 14,971 | 14,971 | 14,971 | 14,971 | 14,971 | 14,971 | 14,971 | 14,971 | 74,853 | 74,853 | 74,853 | 74,853 | 74,853 |
| Webster Basin Power | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 3,000 | 30,000 | 30,000 | 30,000 | 30,000 | 30,000 |
| Webster Mosquilo Abatement | 332,465 | 442 | 442 | 1,752 | 1,919 | 3,274 | 5,000 | 3,569 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 25,450 | 25,450 | 25,450 | 25,450 | 25,450 |
| Webster 911 Dispatch | 845,821 | 1,126 | 1,126 | 4,468 | 4,882 | 8,329 | 9,079 | 12,950 | 12,950 | 12,950 | 12,950 | 12,950 | 12,950 | 12,950 | 12,950 | 12,950 | 12,950 | 12,950 | 64,748 | 64,748 | 64,748 | 64,748 | 64,748 |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Total Revenue | \$ 48,603,010 | 64,678 | 64,678 | 265,145 | 265,010 | 280,515 | 478,614 | 521,716 | 521,716 | 744,112 | 3,720,050 | 3,720,050 | 3,720,050 | 3,720,050 | 3,720,050 |

| County | Assessor | Address | Lot | Block | Value | Ass. Val. | Prop. Tax | Land Tax | Build Tax | Other Tax | Total Tax | Refund | Balance |
|-------------------|--------------|----------|----------|----------|----------|-----------|-----------|----------|-----------|-----------|-----------|-----------|-----------|
| Wabash Co. & City | \$ 2,641,363 | 12,193 S | 11,503 S | 42,069 S | 44,304 S | 41,981 S | 67,412 S | 69,313 S | 65,389 S | 57,904 S | 63,004 S | 75,209 S | 73,862 S |
| Wabash Co. & City | \$ - | - S | - S | - S | - S | - S | - S | - S | - S | - S | - S | 60,737 S | 62,008 S |
| Wabash Co. & City | \$ - | - S | - S | - S | - S | - S | - S | - S | - S | - S | - S | 58,496 S | 55,185 S |
| Wabash Co. & City | \$ - | - S | - S | - S | - S | - S | - S | - S | - S | - S | - S | 52,061 S | 49,107 S |
| Wabash Co. & City | \$ - | - S | - S | - S | - S | - S | - S | - S | - S | - S | - S | 46,327 S | 219,823 S |
| Wabash Co. & City | \$ - | - S | - S | - S | - S | - S | - S | - S | - S | - S | - S | 206,154 S | 194,404 S |
| Wabash Co. & City | \$ - | - S | - S | - S | - S | - S | - S | - S | - S | - S | - S | 170,063 S | 163,267 S |
| Wabash Co. & City | \$ - | - S | - S | - S | - S | - S | - S | - S | - S | - S | - S | 104,001 S | 94,284 S |
| Wabash Co. & City | \$ - | - S | - S | - S | - S | - S | - S | - S | - S | - S | - S | 92,137 S | 129,302 S |

TEC RESOLUTION NO. 2025-1

A RESOLUTION OF THE TAXING ENTITY COMMITTEE FOR THE RIVERDALE CITY REDEVELOPMENT AGENCY GRANTING APPROVAL FOR THE AGENCY TO AMEND THE WEST BENCH REDEVELOPMENT PROJECT AREA BUDGET TO PROVIDE FOR 80% TAX INCREMENT PARTICIPATION OVER A 20-YEAR PERIOD, NOT TO EXCEED \$45,591,683.

RECITALS

WHEREAS, the Riverdale City Redevelopment Agency (the “Agency”) is a separate public body corporate and politic, duly and regularly created, established, organized and existing under and by virtue of the Constitution and laws of the State of Utah; and

WHEREAS, the Agency operates and is authorized to transact business and exercise its powers under and pursuant to the Limited Purpose Local Government Entities – Community Reinvestment Agency Act, Title 17C, Utah Code Annotated 1953, as amended (the “Act”), previously known as the Utah Redevelopment Agencies Act; and

WHEREAS, the West Bench Project Area Plan (the “Plan”) was adopted by the Agency pursuant to Resolution No. R11-2005 which was passed and approved on May 10, 2005, and such Plan was subsequently adopted by the Riverdale City Council pursuant to Ordinance No. 644 on May 10, 2005; and

WHEREAS, the West Bench Project Area Budget (the “Budget”) was approved by the taxing entity committee on October 25, 2012, pursuant to Resolution No. TEC 2012-01, and such Plan was subsequently adopted by the Agency pursuant to Resolution No. R2012-07 on October 30, 2012; and

WHEREAS, the West Bench Project Area Budget (the “Budget”) was amended by the taxing entity committee on September 26, 2019, pursuant to Resolution No. TEC 2019-02, amending the tax collection period to begin with any year from 2020 to 2025; and such Budget was subsequently adopted by the Agency pursuant to Resolution No. 2019-03 on November 6, 2019; and

WHEREAS, a minor amendment to the Budget was approved by the Agency on December 21, 2021, pursuant to Resolution No R2021-05, extending the project area from 15-years to 17-years, subject to Utah Code 17C-1-416; and

WHEREAS, on March 21, 2024, the Agency notified the Weber County Assessor’s office of the Agency’s desire to begin the tax increment collection period for the West Bench RDA (“Project Area”) on January 1, 2025 (“Trigger Date”); and

WHEREAS, as permitted under the Act, the Plan provides for the Agency to receive tax increment revenue from the Project Area pursuant to the Budget, as amended; and

WHEREAS, the Agency now seeks to amend the Budget to reflect a revised tax increment collection period and participation rate, specifically to allow for eighty percent (80%) participation of tax increment revenue for a period of twenty (20) years, commencing with tax year 2025 and concluding with and inclusive of tax year 2045, with a maximum amount collectable not to exceed \$45,591,683; and

WHEREAS, in order to amend the Budget as proposed, the Agency has opted to follow the Budget amendment procedures as permitted and set forth under Section 17C-2-206 of the Act; and

WHEREAS, Section 17C-2-206(2)(b) of the Act requires that the Agency obtain approval of the Taxing Entity Committee (the "Committee") to the same extent the Agency was required to obtain the consent of the Committee for the Budget as originally adopted; and

WHEREAS, the Committee is authorized to approve amendments to the Budget including the amounts of tax increment revenues to be paid and the period of time tax increment revenues are paid to the Agency pursuant to Section 17C-1-402(4)(b)(iv) of the Act; and

WHEREAS, the Committee has determined that it would be of benefit to the public and the taxing entities for the Agency to continue to receive tax increment revenues from the Project Area for the purposes set forth in the Act until and including tax year 2045, with a maximum amount collectable not to exceed \$45,591,683; and

WHEREAS, all information necessary for the Committee to make the approvals set forth herein has been given.

NOW, THEREFORE, it is hereby resolved by the Taxing Entity Committee for the Riverdale City Redevelopment Agency as follows:

Section 1. Terms defined in the forgoing recitals shall have the same meaning when used in the remaining sections of this Resolution.

Section 2. Pursuant to Section 17C-2-206 of the Act, the Committee hereby consents and approves amendment of the Budget as follows:

(a) The base year of the Budget remains 2011 and the base value of the Budget is confirmed to be \$19,951,126; and

(b) The Receipt by the Agency of tax increment revenues from the Project Area from annual taxes collected shall be 100% for the tax year 2025 and shall extend through tax year 2045 at 80% collection with a maximum amount collectable not to exceed \$45,591,683 and a maximum cap from each entity as described in the amended budget attached hereto as Exhibit "A"; and

(c) Said tax increment revenues shall be used solely for the purposes authorized in the Project Area Plan. This may include, but is not limited to, activities such as

land acquisition, site preparation, environmental remediation, public facilities, economic development incentives, affordable housing, or other actions that advance the objectives and implementation of the Plan.

Section 3. This Resolution shall go into effect upon Agency approval of the amendments to the Budget set forth herein and pursuant to the properly noticed public hearings and other requirements as set forth in the Act.

APPROVED AND ADOPTED the 13th day of August, 2025.



Attest: Nicelle Marigard
TEC Secretary

RECORD OF VOTE:

Utah Office of Education
Weber School District
Weber School District
Weber County
Weber County
Riverdale City
Riverdale City
Other Taxing Entities

Exhibit A
to
TEC Resolution

Amended Budget

SEE BELOW

WEST BENCH RDA
Property Tax - AMENDED BUDGET
Weber County

WEST BENCH RDA
Property Tax - AMENDED BUDGET
Wasco County

第10章

RESOLUTION NO. R2025-07

A RESOLUTION OF THE RIVERDALE CITY REDEVELOPMENT AGENCY AMENDING THE WEST BENCH REDEVELOPMENT PROJECT AREA BUDGET TO PROVIDE FOR 80% TAX INCREMENT PARTICIPATION OVER A 20-YEAR PERIOD, NOT TO EXCEED \$45,591,683.

RECITALS

WHEREAS, the Riverdale City Redevelopment Agency (the “**Agency**”) is a separate public body corporate and politic, duly and regularly created, established, organized and existing under and by virtue of the Constitution and laws of the State of Utah; and

WHEREAS, the Agency operates and is authorized to transact business and exercise its powers under and pursuant to the Limited Purpose Local Government Entities – Community Reinvestment Agency Act, Title 17C, Utah Code Annotated 1953, as amended (the “**Act**”), previously known as the Utah Redevelopment Agencies Act; and

WHEREAS, the West Bench Project Area Plan (the “**Plan**”) was adopted by the Agency pursuant to Resolution No. R11-2005 which was passed and approved on May 10, 2005, and such Plan was subsequently adopted by the Riverdale City Council pursuant to Ordinance No. 644 on May 10, 2005; and

WHEREAS, the West Bench Project Area Budget (the “**Budget**”) was approved by the taxing entity committee on October 25, 2012, pursuant to Resolution No. TEC 2012-01, and such Plan was subsequently adopted by the Agency pursuant to Resolution No. R2012-07 on October 30, 2012; and

WHEREAS, the Budget was amended by the taxing entity committee on September 26, 2019, pursuant to Resolution No. TEC 2019-02, amending the tax collection period to begin with any year from 2020 to 2025; and such Budget was subsequently adopted by the Agency pursuant to Resolution No. 2019-03 on November 6, 2019; and

WHEREAS, on March 21, 2024, the Agency notified the Weber County Assessor’s office of the Agency’s desire to begin the tax increment collection period for the West Bench RDA (“**Project Area**”) on January 1, 2025; and

WHEREAS, a minor amendment to the Budget was approved by the Agency on December 21, 2021, pursuant to Resolution No R2021-05, extending the Project Area from 15-years to 17-years, subject to Utah Code 17C-1-416; and

WHEREAS, as permitted under the Act, the Plan provides for the Agency to receive tax increment revenue from the Project Area pursuant to the Budget, as amended; and

WHEREAS, the Agency now seeks to amend the Budget to reflect a revised tax increment collection period and participation rate, specifically to allow for eighty percent (80%) participation of tax increment revenue for a period of twenty (20) years, commencing with tax

year 2025 and concluding with and inclusive of tax year 2045, with a maximum amount collectable not to exceed \$45,591,683; and

WHEREAS, in order to amend the Budget as proposed, the Agency has opted to follow the Budget amendment procedures as permitted and set forth under Section 17C-2-206 of the Act; and

WHEREAS, Section 17C-2-206(2)(b) of the Act requires that the Agency obtain approval of the Taxing Entity Committee (the "**Committee**") to the same extent the Agency was required to obtain the consent of the Committee for the Budget as originally adopted; and

WHEREAS, on August 13, 2025, the Committee approved amendments to the Budget including the amounts of tax increment revenues to be paid and the period of time tax increment revenues are paid to the Agency pursuant to Resolution TEC 2025-1; and

WHEREAS, pursuant to the Act, the Agency has held a public hearing on the Budget amendment and at that public hearing (a) allowed public comment on the Budget amendment and (b) received all written and heard all oral objections to the Budget amendment; and

WHEREAS, the Agency has complied with all requirements of the Act to amend the West Bench Project Area Budget.

NOW, THEREFORE, it is hereby resolved by the Riverdale City Redevelopment Agency as follows:

Section 1. Terms defined in the forgoing recitals shall have the same meaning when used in the remaining sections of this Resolution.

Section 2. Pursuant to Section 17C-2-206 of the Act, the Agency hereby approves amendment of the Budget as follows:

(a) The base year of the Budget remains 2011 and the base value of the Budget is confirmed to be \$19,951,126; and

(b) The Receipt by the Agency of tax increment revenues from the Project Area from annual taxes collected shall be 100% for the tax year 2025 and shall extend through tax year 2045 at 80% collection with a maximum amount collectable not to exceed \$45,591,683 and a maximum cap from each entity as described in the amended budget attached hereto as Exhibit "A"; and

(b) Said tax increment revenues shall be used solely for the purposes authorized in the Project Area Plan. This may include, but is not limited to, activities such as land acquisition, site preparation, environmental remediation, public facilities, economic development incentives, affordable housing, or other actions that advance the objectives and implementation of the Plan.

Section 3. This Resolution shall go into effect upon Agency approval of the amendments to the Budget set forth herein and pursuant to the properly noticed public hearings and other requirements as set forth in the Act.

APPROVED AND ADOPTED the _____ day of _____, 2025.

**RIVERDALE CITY REDEVELOPMENT
AGENCY**

Board Chair

Attest: _____
Agency Secretary

Exhibit A
to
RDA Resolution

Amended Budget

SEE BELOW

**A RESOLUTION OF THE REDEVELOPMENT AGENCY OF RIVERDALE CITY, UTAH,
ADOPTING AND IMPLEMENTING AN “INDEPENDENT LIVING POLICY” FOR THE
SENIOR CENTER APARTMENT FACILITY.**

WHEREAS, the Redevelopment Agency of Riverdale City (“Agency”) owns and/or manages apartment units within the Riverdale Senior Center facility for the benefit of qualified senior residents; and

WHEREAS, the Agency recognizes the importance of providing safe, affordable, and dignified housing while respecting the independence and autonomy of residents; and

WHEREAS, an Independent Living Policy will provide clear expectations for residents, staff, and the Agency regarding the level of services offered, personal responsibility of residents, and procedures for addressing circumstances in which residents may no longer be able to safely or reasonably live independently; and

WHEREAS, the establishment of such a policy will promote consistency, fairness, and compliance with applicable federal, state, and local laws and regulations governing housing, accessibility, and nondiscrimination; and

WHEREAS, the Board of Directors of the Riverdale City RDA finds it in the best interest of the Agency and its residents to formally adopt an Independent Living Policy for the Senior Center apartment facility.

**NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF DIRECTORS OF THE
RIVERDALE CITY REDEVELOPMENT AGENCY, UTAH, THAT:**

1. Adoption of Independent Living Policy.

The Agency hereby adopts the *Independent Living Policy* (attached hereto as *Exhibit A*) governing the occupancy and use of apartment units within the Riverdale Senior Center facility.

2. Key Principles.

The Independent Living Policy shall include, but not be limited to, the following principles:

- **Resident Responsibility:** Residents must be capable of living independently, managing their own personal care, and maintaining their units in a safe and sanitary condition.
- **Support Services:** The facility does not provide assisted living, medical care, or daily living services, though residents may arrange for personal care aides or outside services at their own expense.
- **Safety and Emergency Standards:** Residents must comply with facility safety rules, including emergency procedures, fire codes, and health standards.

- **Periodic Evaluation:** The Agency reserves the right to conduct periodic reviews to ensure residents continue to meet independent living criteria.
- **Transition Procedure:** If a resident becomes unable to live independently, the Agency shall provide notice and work with the resident and family to transition to a more appropriate living arrangement.
- **Nondiscrimination:** The policy shall be applied uniformly without regard to race, color, religion, sex, familial status, disability, national origin, or any other protected class under applicable law.

3. **Implementation.**

Agency staff are directed to implement the Independent Living Policy immediately upon adoption, provide residents with a written copy, and incorporate the policy into lease agreements, resident handbooks, and orientation materials.

4. **Effective Date.**

This Resolution shall become effective immediately upon adoption.

PASSED AND ADOPTED on this ____ day of September, 2025.

RIVERDALE CITY RDA BOARD

Braden Mitchell
Board Chairman

ATTEST:

Michelle Marigoni, City Recorder

VOTE:

| | | | | | | |
|------------------|--------------------------|-----|--------------------------|-----|--------------------------|--------|
| Alan Arnold | <input type="checkbox"/> | Yea | <input type="checkbox"/> | Nay | <input type="checkbox"/> | Absent |
| Bart Stevens | <input type="checkbox"/> | Yea | <input type="checkbox"/> | Nay | <input type="checkbox"/> | Absent |
| Michael Ritchter | <input type="checkbox"/> | Yea | <input type="checkbox"/> | Nay | <input type="checkbox"/> | Absent |
| Anne Hansen | <input type="checkbox"/> | Yea | <input type="checkbox"/> | Nay | <input type="checkbox"/> | Absent |
| Stacey Haws | <input type="checkbox"/> | Yea | <input type="checkbox"/> | Nay | <input type="checkbox"/> | Absent |

Exhibit A

Independent Living Policy

Riverdale City Senior Housing

Effective Date: September 1, 2025

Purpose

Riverdale City Senior Housing is an independent living community designed exclusively for self-sustaining seniors who can perform or arrange external support for all **Activities of Daily Living (ADLs)** and **Instrumental Activities of Daily Living (IADLs)** without reliance on on-site care staff. This policy establishes the independent living requirements, outlines procedures to ensure compliance, and provides supportive mechanisms, such as reasonable accommodations and modifications, to help residents maintain independence. It complies with the Americans with Disabilities Act (ADA), Fair Housing Act (FHA), Utah Fair Housing Act (Utah Code § 57-21-1 et seq.), and Utah Landlord-Tenant Law (Utah Code § 57-22-1 et seq.).

Failure to comply with this policy, including demonstrating the ability to live independently (with or without external support) during periodic check-ins or when questioned, may result in lease termination, per Utah Code § 57-22-5.

Independent Living Requirements

Residents must be self-sustaining, meaning they can independently perform or arrange external support (e.g., home health aides, family assistance) for all daily living tasks at their own expense. The facility does not provide on-site care services. Residents must maintain these requirements throughout their tenancy.

Activities of Daily Living (ADLs)

ADLs are basic self-care tasks, **including but not limited to**:

- **Bathing/Showering:** Washing the body, including getting in/out of a tub or shower.
- **Dressing:** Selecting and putting on clothing, managing fasteners (e.g., buttons, zippers).
- **Eating:** Feeding oneself, using utensils, or drinking from a cup.
- **Personal Hygiene/Grooming:** Brushing teeth, combing hair, shaving, or applying hygiene products.
- **Toileting:** Using the bathroom, cleaning oneself, and managing clothing.
- **Mobility/Transferring:** Walking, navigating stairs, or transferring from bed/chair.
- **Continence Management:** Managing bladder/bowel functions and related supplies.

Instrumental Activities of Daily Living (IADLs)

IADLs are complex tasks for managing one's environment, **including but not limited to**:

- **Managing Finances:** Paying bills, budgeting, handling banking or insurance.
- **Medication Management:** Obtaining and taking medications independently and as prescribed.
- **Meal Preparation:** Planning and cooking meals, using appliances safely.
- **Housekeeping:** Tidying living spaces, keeping unit clean and safe, doing laundry, washing dishes.
- **Transportation:** Arranging/driving to appointments, stores, or social activities.
- **Shopping:** Purchasing groceries, clothing, or necessities.
- **Communication:** Using phone/email for appointments or emergencies.
- **Managing Appointments:** Scheduling and attending medical or personal appointments.
- **Home Maintenance:** Arranging minor repairs (e.g., contacting a plumber).
- **Safety Awareness:** Responding appropriately to emergencies, locking doors, using appliances safely (able to see, hear, evacuate unassisted, etc.).
- **Independence:** Arrange for third-party services without landlord involvement or other residents.

Residents requiring assistance must arrange external support at their own expense. Failure to meet these requirements may result in lease termination, per Utah Code § 57-22-5.

Indicators of Declining Capacity

While the property does not monitor or assess tenant health, certain observable conditions may prompt a capacity review such as:

- Repeated emergency medical calls or ambulance visits
- Tenant found disoriented or wandering, especially outside their unit
- Reports or complaints of neglect, unsanitary conditions, or strong odors
- Inability to respond to fire alarms, door knocks, or phone calls
- Visible signs of missed hygiene or physical decline
- Tenant requesting or expecting personal care from staff
- Documented concerns from neighbors, family, or emergency responders

This list is a partial list and is NOT all inclusive.

Periodic Check-Ins to Ensure Compliance

To confirm residents' ability to meet independent living requirements, the facility conducts:

- **Triggered Check-Ins:** Initiated if staff observe and document concerns about a resident's ability to live independently (e.g., difficulty with mobility or managing tasks).

Check-In Process

1. **Notification:** Residents receive written notice (Attachment B) of an observed concern, including the Independent Living Assessment Form (Attachment C).
2. **Assessment:** A staff member, or other professional personnel, meets with the resident to review their ability to perform or arrange support for ADLs/IADLs, using the Independent Living Assessment Form.
3. **Evaluation:** If compliant, the outcome is documented. If concerns arise, a Support Plan is issued.
4. **Support Plan:** Residents receive a 30-day period to arrange external support or demonstrate compliance (Attachment D), with resources provided (e.g., home health agencies).
5. **Follow-Up:** A follow-up meeting assesses progress. If unresolved, lease termination procedures begin.
6. **Lease Termination:** If a resident cannot meet requirements, a 30-day Notice of Lease Termination (Attachment E) is issued, per Utah Code § 57-22-5, with resources for alternative housing.
7. **Repeated occurrences:** Continued violations/support plans may be used and considered as grounds for lease termination.

Failure to demonstrate independent living ability during check-ins or when questioned may result in lease termination.

Reasonable Accommodations and Modifications

To support residents' ability to live independently, the facility provides a process for requesting reasonable accommodations or modifications, per ADA, FHA, and Utah Code § 57-21-6.

Examples of Accommodations

- Allowing assistive devices (e.g., wheelchairs, scooters), per Utah safety codes.
- Providing notices/forms in accessible formats (e.g., large print, Braille).
- Allowing external care providers (e.g., aides, housekeepers, senior companions, etc.), subject to lease terms and Utah background checks (Utah Code § 62A-3-101 et seq.) if requested by the landlord.
- Modifying emergency procedures.

Examples of Modifications

- Installing accessibility features (e.g., grab bars, ramps) at resident's expense, per Utah Code § 57-21-6 and with the landlord's knowledge and written approval.
- Providing accessible parking spaces, per Utah Code § 41-1a-414.

Request Process

1. **Submission:**

- Submit a written request using the Reasonable Accommodation/Modification Request Form (Attachment A) or a letter to:
Riverdale City Senior Housing
4433 So. 900 W., Riverdale, UT 84405
Phone: (801) 621-6084
Email: rtaylor@riverdaleutah.gov
Office Hours: Monday–Friday, 9:00 AM–5:00 PM
- Include description, explanation of need, and optional documentation if not obvious.
- Assistance with form completion is available.

2. **Review:** Acknowledgment within a timely manner; additional information requested within 30 business days if needed. Modifications must comply with Utah building codes (Utah Code § 15A-1-201 et seq.).
3. **Decision:** Written decision within 14 business days, unless extended. Approved requests include implementation details; denied requests explain reasons and offer alternatives. Appeals can be submitted within 10 business days.
4. **Implementation:** Accommodations implemented within 30 days, modifications within 30–60 days, unless extended by landlord. Residents cover modification costs/restoration.

Confidentiality

Requests, assessment forms, and related records are confidential, shared only with staff involved in evaluation/implementation, and stored securely for 3 years, per Utah Code § 57-21-12.

Appeals and Complaints

- **Appeals:** Submit written appeal to the facility manager within 10 business days; reviewed within 14 business days.
- **Complaints:** File with:
 - Utah Labor Commission, Antidiscrimination and Labor Division: 160 East 300 South, Salt Lake City, UT 84111; (801) 530-6801; www.laborcommission.utah.gov.
 - U.S. Department of Housing and Urban Development: www.hud.gov; 1-800-669-9777.
 - Complaints must be filed within 1 year, per Utah Code § 57-21-9.

Compliance

This policy complies with ADA, FHA, Utah Fair Housing Act (Utah Code § 57-21-6), and Utah Landlord-Tenant Law (Utah Code § 57-22-4).

Acknowledgment and Family Contacts

By signing below, I acknowledge receipt of the Independent Living Policy and understand that failure to comply with the independent living requirements, including demonstrating the ability to perform or arrange support for ADLs/IADLs during check-ins or when questioned, may result in lease termination,

per Utah Code § 57-22-5. I also understand that failure to disclose material information or providing false information during assessments or accommodation requests, to the extent allowable under the ADA, FHA, and Utah state law, may result in lease termination, per Utah Code § 57-22-4.

Signature: _____

Resident Name: _____

Date: _____

Unit Number: _____

Family Contact(s) for Policy Distribution:

1. Name: _____

Relationship: _____

Phone: _____

Email: _____

Address: _____

[] Send policy copy (check if desired)

2. Name: _____

Relationship: _____

Phone: _____

Email: _____

Address: _____

[] Send policy copy (check if desired)

Facility Representative: _____

Signature: _____

Date: _____

Attachments

- Attachment A: Reasonable Accommodation/Modification Request Form
- Attachment B: Notification Letter Template
- Attachment C: Independent Living Assessment Form
- Attachment D: Support Plan Notice Template
- Attachment E: Notice of Lease Termination Template
- Attachment F: Tenant Capacity Concern Report Form

Attachment A: Reasonable Accommodation/Modification Request Form

Riverdale City Senior Housing

Instructions: Complete this form to request a reasonable accommodation or modification to support your ability to live independently. Submit to Riverdale City Senior Housing, 123 Main Street, Riverdale, UT 84405, or email to accommodations@riverdaleseniorhousing.com. Assistance is available for completion if needed due to disability-related limitations. Providing false information may result in lease termination.

Resident/Applicant Name: _____

Unit Number (if applicable): _____

Phone: _____

Email: _____

Type of Request:

Reasonable Accommodation (e.g., policy change, service animal)

Reasonable Modification (e.g., grab bars, ramp)

Description of Request:

How does this accommodation/modification assist you in using/enjoying your housing?

Supporting Documentation (optional, unless need is not obvious):

Attached (e.g., letter from healthcare provider)

Not applicable (e.g., need is obvious, such as wheelchair use)

Additional Information (e.g., for modifications, specify contractor or installation details):

Signature: _____

Date: _____

For Facility Use Only:

Received: _____ By: _____

Acknowledged: _____ Decision: _____

Attachment B: Notification Letter Template

Riverdale City Senior Housing

[Date]

[Resident Name]
[Unit Number]
123 Main Street
Riverdale, UT 84405

Dear [Resident Name],

This letter notifies you of a scheduled check-in to confirm your continued ability to meet the independent living requirements of Riverdale City Senior Housing, as outlined in the Independent Living Policy. The check-in is scheduled for [Date/Time] at [Location/Virtual Option].

The purpose is to assess your ability to perform or arrange support for Activities of Daily Living (e.g., bathing, dressing) and Instrumental Activities of Daily Living (e.g., managing finances, transportation). Enclosed is the Independent Living Assessment Form (Attachment C). Contact us to confirm, reschedule, or request an accessible format/assistance.

Failure to demonstrate the ability to live independently, or providing false information during the assessment, may result in lease termination.

Contact:
Riverdale City Senior Housing
Phone: (801) 555-1234
Email: accommodations@riverdaleseniorhousing.com

Sincerely,
[Facility Manager Name]
Facility Manager

Attachment C: Independent Living Assessment Form

Riverdale City Senior Housing

Purpose: This form is used during periodic (annual or triggered) check-ins to assess a resident's ability to meet the independent living requirements of Riverdale City Senior Housing, as outlined in the Independent Living Policy. The assessment confirms whether the resident can perform or arrange external support for **Activities of Daily Living (ADLs)** and **Instrumental Activities of Daily Living (IADLs)** without reliance on on-site care staff. The process complies with the Americans with Disabilities Act (ADA), Fair Housing Act (FHA), and Utah Fair Housing Act (Utah Code § 57-21-1 et seq.). Residents must complete this form with a staff member during the check-in meeting. All responses are confidential and used solely to evaluate compliance with the independent living model. Providing false information or failing to disclose material information may result in lease termination.

Instructions for Residents:

- Answer each question honestly and truthfully, indicating whether you can perform the task independently or have arranged external support (e.g., home health aide, family assistance).
- Provide details where requested, including contact information for any external support providers.
- If you require assistance completing this form due to disability-related needs (e.g., visual or motor impairments), inform the staff member, and accommodations may be provided, per Utah Code § 57-21-6.
- Sign the form to acknowledge the discussion. You will receive a copy for your records.

Instructions for Staff:

- Conduct the assessment in a private, respectful setting, using neutral language to focus on functional abilities, not health conditions or disabilities, per ADA and FHA guidelines.
- Document responses accurately, noting specific observations (e.g., "Resident reports needing help with laundry" rather than "Resident appears frail").
- If concerns arise, issue a Support Plan Notice (Attachment D) and provide resources to assist the resident.
- Store the completed form securely in the resident's file, retaining it for at least 3 years, per Utah Code § 57-21-12.

Resident Information

Name: _____

Unit Number: _____

Date of Assessment: _____

Type of Check-In: [] Triggered [] Other (Reason: _____)

Assessment Questions

Check the appropriate box and provide details where requested. If you use external support, include provider contact information.

Activities of Daily Living (ADLs)

1. **Bathing/Showering:** Can you independently wash your body, including getting in and out of a tub or shower safely?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

2. **Dressing:** Are you able to select appropriate clothing and put it on, including managing buttons, zippers, or other fasteners?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

3. **Eating:** Can you feed yourself, including preparing simple meals/snacks and using utensils or drinking from a cup?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

4. **Personal Hygiene/Grooming:** Are you able to perform tasks such as brushing teeth, combing hair, shaving, or applying hygiene products?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

5. **Toileting:** Can you use the bathroom independently, including getting on/off the toilet, cleaning yourself, and managing clothing?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

6. **Mobility/Transferring:** Are you able to move around your living space, including walking, navigating stairs, or transferring from bed/chair?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

7. **Continence Management:** Can you manage bladder and bowel functions, including recognizing the need to use the bathroom and handling supplies?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

Instrumental Activities of Daily Living (IADLs)

8. **Managing Finances:** Are you able to pay bills, manage a bank account, budget for rent/expenses, or handle insurance paperwork?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

9. **Medication Management:** Can you obtain, organize, and take medications as prescribed, including refilling prescriptions?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

10. **Meal Preparation:** Are you able to plan and cook meals or arrange for meal delivery, using kitchen appliances safely?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

11. **Housekeeping:** Can you perform light cleaning tasks, such as tidying your living space, doing laundry, or washing dishes?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

12. **Transportation:** Are you able to arrange and use transportation (e.g., driving, public transit, ride services) for appointments or shopping?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

13. **Shopping:** Can you purchase groceries, clothing, or other necessities, either in-person or online, and transport items home?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

14. **Communication:** Are you able to use a phone, email, or other devices to communicate with family, service providers, or emergency contacts?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

15. **Managing Appointments:** Can you schedule and attend medical, personal, or social appointments independently or with arranged support?

[] Yes [] No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

16. **Home Maintenance:** Are you able to arrange minor home repairs or maintenance (e.g., contacting a plumber or electrician)?

Yes No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

17. **Safety Awareness:** Can you recognize and respond to safety risks, such as locking doors, using appliances safely, or contacting help in emergencies?

Yes No

Details/External Support (if applicable):

Provider Contact (if applicable): Name: _____

Phone: _____

Additional Comments or Observations

Include any relevant details, such as accommodations requested or specific support arrangements.

Resident Acknowledgment

I confirm that the information provided is true and accurate and that I participated in this assessment to evaluate my ability to meet the independent living requirements of Riverdale City Senior Housing. I understand that failure to demonstrate the ability to live independently, with or without external support, or failure to disclose material information or providing false information during this assessment, to the extent allowable under the ADA, FHA, and Utah state law, may result in lease termination.

Resident Signature: _____

Date: _____

Staff Acknowledgment

I confirm that this assessment was conducted in compliance with the Independent Living Policy, using neutral language and focusing on functional abilities.

Staff Name: _____

Staff Signature: _____

Date: _____

For Facility Use Only

Outcome:

Compliant: Resident meets independent living requirements.

[] Support Plan Needed: Concerns identified (see below). Issue Support Plan Notice (Attachment D).
Concerns (if applicable):

Follow-Up Date (if applicable): _____

Resources Provided: [] List of home health agencies [] Transportation services [] Other:

Attachment D: Support Plan Notice Template

Riverdale City Senior Housing

[Date]

[Resident Name]
[Unit Number]
123 Main Street
Riverdale, UT 84405

Dear [Resident Name],

Following your check-in on _____, we observed that you may require assistance with _____ [specific task, e.g., medication management] to meet the independent living requirements of Riverdale City Senior Housing. You have 30 days to arrange external support (e.g., home health aide) or demonstrate compliance.

Enclosed are resources (e.g., home health agencies, transportation services). A follow-up meeting is scheduled for [Date/Time]. Failure to resolve this concern, or providing false information during the follow-up, may result in lease termination.

Contact:

Riverdale City Senior Housing
Phone: (801) 621-6084
Email: rtaylor@riverdaleutah.gov

Sincerely,
Rich Taylor
Facility Manager

Attachment E: Notice of Lease Termination Template

Riverdale City Senior Housing

[Date]

[Resident Name]
[Unit Number]
123 Main Street
Riverdale, UT 84405

Dear [Resident Name],

Following your check-in on [Date] and the 30-day Support Plan period ending [Date], you are unable to meet the independent living requirements of Riverdale City Senior Housing, specifically [describe issue, e.g., inability to manage ADLs without on-site staff]. [If applicable: Additionally, false information was provided regarding your ability to perform specific tasks.]

Per your lease and Utah Code, this is a 30-day notice of lease termination, effective [Date]. Enclosed are alternative housing options (e.g., assisted living facilities). Contact us to discuss or explore accommodations.

Contact:
Riverdale City Senior Housing
Phone: (801) 621-6084
Email: rtaylor@riverdaleutah.gov

Sincerely,
Rich Taylor
Facility Manager

Attachment F: Tenant Capacity Concern Report Form

Riverdale City Senior Housing

Date of Report: _____
Reported By (Individual, Staff Name & Title): _____

Tenant Name: _____
Tenant Unit #: _____

Describe in detail the observations or incidents that led to concern about the tenant's ability to live independently (Who, What, When, Where). Be factual and objective. Include dates, times, and any witnesses:

Was emergency medical assistance involved? Yes No
If yes, describe the situation and outcome:

Has this tenant shown prior signs of concern? Yes No Unknown
If yes, please summarize prior incidents or attach previous reports:

Was the behavior isolated or recurring? If recurring, describe frequency and dates:

Physical and Cognitive Indicators

List any physical signs of concern (e.g., fall, disorientation, mobility issues):

List any cognitive or behavioral signs (e.g., memory loss, confusion, agitation):

Environmental Conditions

Describe the condition of the tenant's unit (cleanliness, odors, hazards):

Photographs or other documentation attached? [] Yes [] No

Tenant Interaction

Summarize conversation(s) with the tenant regarding this concern:

Did the tenant acknowledge any difficulty or need for assistance? [] Yes [] No

Was a family member or contact person notified? [] Yes [] No

Preliminary Observations

Does the situation pose a safety concern for the tenant or others? [] Yes [] No

Any statements made by the tenant that are relevant to this report:

Immediate Action Taken (if any):

Suggested follow-up action (e.g., meeting, referral, re-check):

Signature of Staff Completing Form: _____
Date: _____