



Resident Consent Form for EOEA Review

The Executive Office of Elder Affairs (EOEA) is responsible for certifying and monitoring Assisted Living Residences in Massachusetts. In order to determine that the Residence meets the standards and requirements established by law, we are required to review Resident records.

I hereby consent to EOEA, its employees and agents, to review my living quarters, examine my service plan and written progress reports, and other appropriate documents on file at 2 Harvest Circle Lincoln MA 01773. I also consent to be interviewed by staff or an agent of EOEA, in private, to assist with the certification and monitoring process. All of the information collected will be maintained in confidence, under the requirements of the M.G.L.c. 66A.

SIGNATURE OF RESIDENT or RESIDENT’S LEGAL REPRESENTATIVE¹	
Name: _____	
Date: _____	
Signature: _____	
Or	
Electronic Signature:	
<input type="checkbox"/> (check if applicable) <i>I have agreed to sign this form by electronic means. I understand and intend that my electronic signature have the same legal effect as a written signature.</i>	
BENCHMARK SENIOR LIVING LLC ON BEHALF OF THE COMMUNITY	
Name: _____	Title: _____
Signature: _____	Date: _____

¹ The Legal Representative is a person authorized by the Resident and/or applicable law to make health care and contract decisions on the Resident’s behalf in connection with his or her residency at the Community. The Resident must have a Legal Representative if the Resident does not wish to, or is not capable of making, health care or contracting decisions on his or her own behalf.