



205 SE Spokane Street #375, Portland, OR 97202
Phone: 503-505-5865
Web: RetirementConnection.com

For Internal Use - Date Received: _____

Housing Grid Questionnaire

ALL Communities are included at no charge, your listing is FREE

Community Name: _____

Phone: _____

Community Address: _____

City: _____

ST: _____

Zip: _____

Contact Person: _____

Email: _____

Only complete the fields your community offers: Independent, Assisted, Memory, Nursing/Long Term Care with any changes

☐ No changes from last edition

Housing

Independent Living and Retirement Developments

TELEPHONE	CONTINUUM CCRC	STUDIO APT	1 BEDROOM	2 BEDROOM	MEALS AVAILABLE	ACTIVITY PROGRAM	HOUSEKEEPING	HANDICAP ACCESS	SCHEDULED TRANS	PETS ALLOWED	# OF UNITS	STARTING PRICE
Community Name & address <i>if different</i>	555-123-1234	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90	\$1500
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Assisted Living, Residential & Family Care Home

TELEPHONE	BEDRM OR STUDIO LICENSE TYPE	1 BEDRM	KITCHENETTE	NURSE ON STAFF	MEMORY CARE ON SITE	NURSING HM ON SITE	PETS ALLOWED	ACCEPT MEDICAID	NUMBER OF UNITS	STARTING PRICE
Community Name & address <i>if different</i>	555-123-1234	A	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60	\$3500
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Memory Care

TELEPHONE	ALZ/DEMENTIA ONLY LICENSE TYPE	FURNISHED APT	SEMI-PRIVATE	PRIVATE ROOMS	RESPIRE CARE	ADULT DAY CARE	NURSING HM ON STAFF	ACCEPTS MEDICAID	# OF ALZ UNITS	STARTING PRICE
Community Name & address <i>if different</i>	555-123-1234	R	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	50	\$4000
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Skilled Nursing & Intermediate Care

TELEPHONE	MEMORY CARE ON SITE	LONG-TERM CARE	SKILLED NURSING	REHAB & THERAPY	PRIVATE ROOMS	ACCEPTS MEDICAID	ACCEPTS MEDICARE	# OF BEDS	STARTING PRICE
Community Name & address <i>if different</i>	555-123-1234	R	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	50	\$160
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Additionally check any boxes you feel appropriate below:

- ☐ I would like to have FREE copies of the Guide to distribute to Caregivers, Boomers, Seniors & other Professionals
- ☐ I am interested in providing educational article content for the guide or website and would like to be contacted
- ☐ I am interested in learning more about advertising/sponsor opportunities and would like to be contacted