

**Municipality of Anchorage  
Anchorage Health Department  
Housing and Homeless Services  
Emergency Shelter Plan for Homeless Persons**

Application Check List & Approval Procedures

Applicants will submit their completed application form, with all requested documentation, to AHD @ [housingandhomelesservices@anchorageak.gov](mailto:housingandhomelesservices@anchorageak.gov), who will verify the following:

- Information on application form is complete
- Copy of insurance certificate included
- Copy of last Fire Department inspection included
- Plan of operations included:
  - Planned operating hours, including timeframes for clients to enter and exit shelter each night.
  - Annotated diagram of facility used for shelter: indicate ingress and egress, sleeping location and spaces clients will have access to. Diagram may be annotated by hand or a conceptual drawing; technical or architectural documents not required.
  - Protocol for how guests will enter your shelter.
  - Staffing plan, including training and supervision.
  - Plan for notifying clients at least 7 days in advance about shelter deactivation, including visible posting of notice.
  - Protocols or mitigation strategies to protect public health from communicable disease (if applicable).
  - Compliance with ADA standards (if applicable).
  - Care plan for households who are medically fragile (if applicable).
  - Coordination with other shelter providers, Anchorage Health Department and the Anchorage Coalition to End Homelessness (if applicable).

If all information is complete, the application will be routed to the Fire Marshall for their review. The Fire Marshall will:

- Arrange an inspection of the applying facility
- Work with the applicant to schedule a Fire Drill/ Fire Life Safety Training
- Verify that the facility maintains a Fire Safety & Evacuation Plan on-site
- Verify that the sleeping area has a posted emergency plan with marked egress routes to a specific gathering place

- Verify compliance with all other requirements of AFD Fire Prevention Policy # 17-10
- Either approve, or disapprove, the application and return it to AHD

If the Fire Marshall approves the application, AHD will make a recommendation to the Director of AHD, who will make the final determination regarding designation.

For questions: 907-343-6718

Ver. 8\_22 PM