



Municipality of Anchorage

## ANCHORAGE HEALTH DEPARTMENT

### Housing and Homelessness Services

825 L Street, Anchorage, AK 99501 | 907-343-6722

[ahdshelterlicensing@anchorageak.gov](mailto:ahdshelterlicensing@anchorageak.gov)



## INFORMATION GUIDE ON EMERGENCY COLD WEATHER DESIGNATION & HOMELESS SHELTER LICENSING

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## EMERGENCY COLD WEATHER SHELTER DESIGNATION

[Anchorage Municipal Code 16.120](#) outlines the emergency shelter plan for homeless persons, implements measures to coordinate public and private resources when a lack of available shelter options poses a danger to the life and health of unsheltered people within the municipality. The plan objective is to safeguard the lives of vulnerable homeless individuals by providing shelter or sites during such emergency conditions.

### EMERGENCY SHELTER PLAN ACTIVATION

The Emergency Shelter Plan is activated under the following circumstances:

1. Automatically when the outside temperature drops to 45 degrees Fahrenheit or below (by ambient or wind-chill measures) on the day when sheltering begins;
2. At the discretion of the Mayor by declaration of civil emergency; OR
3. When the Director of the Anchorage Health Department determines in writing the lack of available shelter options otherwise pose a danger to the life and health of unsheltered people within the municipality.

Temperature readings are used from the National Weather Service station at Merrill Field Airport, if that station is offline, Lake Hood, Elmendorf or Ted Stevens International Airport stations may be used.

### EMERGENCY SHELTER PLAN DE-ACTIVATION

The Emergency Shelter Plan is de-activated:

1. When the outside temperature subsequently rises above 45 degrees Fahrenheit after plan activation;
2. Upon expiration of the relevant declaration of civil emergency; OR
3. When the Director of the Anchorage Health Department determines in writing that a lack of available shelter options no longer poses a danger to the life and health of unsheltered people within the municipality.

### CAPACITY

Emergency shelter locations activated under this section shall be for **no more than 150 clients in a single location** without assembly approval.

Emergency shelter locations activated by the mayor under a declaration of civil emergency and extended by the assembly may exceed the 150 client capacity and shall be allowed to remain operational at the activated capacity at the time of the termination of the civil emergency for up to one year following the termination of a declaration of civil emergency.

### APPLYING FOR A DESIGNATION

#### REQUIRED DOCUMENTS

This list includes all required documents needed for the Emergency Cold Weather Shelter Designation. The Anchorage Health Department will need copies of the following documents:

- Anchorage Fire Department Inspection
  - To schedule your inspection please call the Fire Prevention Division: 907-267-4900

- Plans and Protocols of Operations, to include but not limited to:
  - Plan for cooperating with other emergency shelter providers
  - Entry protocols
    - If your emergency shelter is a religious assembly or organization include your protocols for limiting the use of the facility by those who are not under the influence of alcohol and/or other substances not prescribed to the individual
  - Plan for minimum of seven (7) days; notice to occupants for closure whether voluntary or deactivation
- Certificate of Insurance

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## PROCESS

After collecting the required documents mentioned above, please complete the following:

- Complete the Emergency Cold Weather Shelter Designation application
  - Applications can be completed electronically or on paper
    - For the online application please visit our website  
[www.muni.org/Departments/health/HousingAndHomelessness/Pages/ShelterLicensing.aspx](http://www.muni.org/Departments/health/HousingAndHomelessness/Pages/ShelterLicensing.aspx)
    - Paper applications can be downloaded from our website using the link above, you may call to request one be mailed to you or you may pick one up in person from the Anchorage Health Department.
    - Applications will not be accepted until all required documents have been submitted. Documents must be submitted within 30 days after receiving the application.
- Once all the above steps have been completed, your complete packet will be submitted to the following departments for approval:
  - Anchorage Fire Department
  - Housing and Homelessness Services Division Manager
  - Anchorage Health Department Director
- After approval from all municipal departments, a certificate of designation will be issued. Approved designations will be issued for two (2) years.

## RENEWING YOUR DESIGNATION

If you wish to renew your Emergency Cold Weather Shelter Designation for an additional two (2) years, please complete the steps above.

## HOMELESS AND TRANSIENT SHELTER LICENSING

### WHAT TO KNOW ABOUT SHELTER LICENSING

On June 22, 2021, the Anchorage Assembly passed [AO No. 2021-55\(S-1\)](#) which established homeless and transient shelters required licenses to operate within the municipality. Anchorage Municipal Code [Chapter 16.125](#) outlines the requirements to obtain a license, operations under a license, and requirements for health and safety standards of homeless and transient shelters.

**Licensing is not just a requirement; it's a tool for safety, accountability and credibility.**

### WHY IS GETTING LICENSED IMPORTANT?

Having a homeless and transient shelter become licensed is important because:

- It ensures compliance with the Anchorage Municipal Code (AMC)
- It protects those utilizing shelter to ensure sanitation and safety are being met
- It helps the shelter gain credibility and trust with clients and the community
- It supports accountability

### WHAT ARE THE BENEFITS OF GETTING LICENSED?

The benefits of getting a homeless and transient shelter license include:

- **Improved Credibility:** A licensed shelter gains trust amongst the community and guests being served
- **Legal Compliance:** Obtaining a license ensures the shelter is operating within legal boundaries as well as protection for operators to establish guidelines
- **Financial Stability:** Having a shelter license can help secure funding and grants
- **Health & Safety Standards:** A licensed shelter ensures that the shelters are in compliance with required health, safety and operational standards

### OTHER THINGS TO KNOW

- The first time applying for a license is more extensive than a renewal. We are collecting all the information for the first time and first-time applications must be approved by the Anchorage Assembly.
- Shelter operators are responsible to update the Anchorage Health Department of any changes of information within 15 days of change per AMC 16.125.080.B.

We are here to help! If you have questions, please reach out to our team.

Email: [ahdshelterlicensing@anchorageak.gov](mailto:ahdshelterlicensing@anchorageak.gov)

Phone: 907-343-6722

### APPLYING FOR A LICENSE – INITIAL APPLICATION

#### REQUIRED DOCUMENTS

This list includes all required documents for the Shelter Licensing Application. The Anchorage Health Department will need copies of the following documents (not all may be applicable to your organization):

- Articles of Association
- Articles of Incorporation
- Business License
- Bylaws
- Emergency Disaster Plan
  - To included but not limited to: evacuation plans, fires, earthquakes, volcanic eruption and/or ashfall, pandemic or manmade disaster.
- Good Neighbor Policy
- Letter of Authorization Allowing Use of Property from Owner of Property
- Operating Agreement
- Partnership Agreement
- Policies and Procedures (*please see AHD website for template if needed*)
  - Client Feedback Collection Methods
  - Deterrents and Reduction of Client Loitering and Prohibited Camping
  - Esurance of Safety for Clients, Staff, and Volunteers
  - Injury and Disease Prevention
  - Method of Screening Individuals Who Are Under the Influence
    - Including Plan to Provide for their Immediate Need if the Shelter will Admit Such Persons
  - Operating Plan
  - Projected Staffing Level
  - Proposed Maximum Stay
  - Rules of Conduct
  - Security Plan for Handling Incidents of Violence
  - Support Services to be Provided
  - Transportation Protocols (Day Shelters Only)
  - Trespass and Admission Denial Criteria
  - Verification of AKHMIS and Coordinated Entry Compliance
- Proof of Accreditation (optional)
- Proof of Insurance

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## PROCESS

After collecting the documents mentioned above, please complete the following:

- Complete the shelter licensing application
  - Applications can be completed electronically or on paper
    - For the online application please visit our website  
[www.muni.org/Departments/health/HousingAndHomelessness/Pages/ShelterLicensing.aspx](http://www.muni.org/Departments/health/HousingAndHomelessness/Pages/ShelterLicensing.aspx)
    - Paper applications can be downloaded from our website using the link above, you may call to request one be mailed to you or you may pick one up in person from the Anchorage Health Department.

- Applications will not be accepted until all required documents have been submitted. Documents must be submitted within 30 days after receiving the application.
  - Once application has been accepted shelters must send a representative to pick up a [public notice sign](#) to be posted in visible public right-of-way.
- Obtain fingerprints for an independent background check conducted by the Anchorage Health Department.
  - The applicant named on the shelter license and all managing members of the shelter are required to submit fingerprints for background checks.
- Contact the Anchorage Fire Department for an inspection.
  - Once completed, send a copy of the approved final inspection to [ahdshelterlicensing@anchorageak.gov](mailto:ahdshelterlicensing@anchorageak.gov)
    - To schedule your inspection please call the Fire Prevention Division: 907-267-4900
- Schedule a health and safety inspection with the Anchorage Health Department, Housing and Homelessness Services team
  - To schedule you may call 907-343-6722 or email [ahdshelterlicensing@anchorageak.gov](mailto:ahdshelterlicensing@anchorageak.gov)
- Once all the above steps have been completed, your complete packet will be submitted to the following departments for approval:
  - Anchorage Fire Department
  - Risk Management (Insurance Review)
  - Land Use Enforcement (Zoning Review)
  - Housing and Homelessness Services Division Manager
  - Anchorage Health Department Director
- After approval from all municipal departments, the application packet will be submitted to the Anchorage Assembly via Assembly Memorandum for final approval. Approved licenses will be issued for three (3) years.

#### FINGERPRINTING AND BACKGROUND CHECKS

A homeless and transient shelter license may not be issued to any shelter if the applicant, any individual on the application as a licensee, or any managing member of the applicant has been convicted of a barrier crime pursuant to 7 AAC 10.905, unless granted a waiver by the Anchorage Health Department Director.

The Anchorage Health Department (AHD) will conduct independent background checks. Instructions for shelters are as follows:

1. Determine who in your organization is required to undergo a background check.
  - a. AHD will conduct independent background checks on the applicant, any individual on the application as a licensee, and any managing member of the applicant.
2. Obtain fingerprints.
  - a. Anchorage Police Department and the Alaska State Troopers do not provide fingerprinting service to the general public. You are not restricted on which firm you select, but fingerprints must be submitted on the standard **FD-258 card**. Please do not fold or bends the card(s); keep them flat and clean. Do not enter any information onto the card(s) until instructed by the fingerprinting firm.
  - b. Please have the following included on your card:
    - i. Client #6007

- ii. Reason Fingerprinted: AS12.62.160(B)(9).  
**\*This information is crucial to ensure that the background check reports are sent to the correct requesting agency for review**
3. Prepare an envelope for the Anchorage Health Department.
  - a. Submit all fingerprints in one envelope along with a check for the number of background checks. The processing fee is **\$47.00 per background check**. For example, if you have 4 fingerprint cards for background checks the amount of the check would be \$188.00.
  - b. All checks must be made out to the “Alaska Department of Public Safety”.
  - c. Complete the [Fingerprint Consent Form](#) (*Only if you have the Anchorage Health Department take your fingerprints on your behalf to the Department of Public Safety*)
4. Deliver the envelope.
  - a. Applications have three (3) options to submit fingerprints:
    - i. Mail the sealed envelope to:  
Anchorage Health Department  
Attn: Housing and Homelessness Services  
825 L Street  
Anchorage, AK 99501
    - ii. Deliver in-person to the address above. If delivering the envelope, it needs to be handed directly to a Housing and Homelessness Services team member.
    - iii. Take to Department of Public Safety directly. If delivering to public safety directly please provide a copy of receipt to AHD for proof of submission.  
Department of Public Safety  
5700 E Tudor Road  
Anchorage, AK 99507
5. After submitting the envelope, the Anchorage Health Department will forward the envelope to the Alaska Department of Public Safety if not taken to the Department of Safety directly by shelter operator. No action by the shelter is required at this time.
6. The Alaska Department of Public Safety will complete a criminal background check both at the local, state and national level and provide the results to the Anchorage Health Department.
7. The results of each background check will be used to determine whether an applicant, any individual on the application as a licensee, or any managing member of the applicant has been charged or convicted of a barrier crime pursuant to 7 AAC 10.905.
8. If one of these individuals has been charged or convicted of a barrier crime, AHD will review according to 7 AAC 10.905 and notify shelters if they must submit a Barrier Crime Waiver Application and have not already done so. Any barrier crimes less than 10 years old and any permanent barrier crime will require a waiver.
9. The Anchorage Health Department Director will determine whether or not to grant a waiver based on all information provided in the Barrier Crime Waiver Application.

Please review the [Privacy Act Statement](#) for background checks and fingerprinting.

We recognize this process is expensive and time consuming but important and necessary.

#### PUBLIC NOTICE POSTING

Shelters are required to follow the procedures for public notice:

1. AHD will contact shelters upon receipt on completed application. A shelter staff member will come to 825 L Street, Suite 508, Anchorage, AK 99501 to pick up the public notice sign(s).
  - a. The security guard will call the Housing and Homelessness Services staff down to the lobby to meet.
  - b. Public notice signs must be picked up and posted in the appropriate locations (see section 3 below) within 10 days of submitting an application.
2. Shelters are encouraged but not required to submit background check fingerprint envelopes when they pick up public notice signs.
  - a. See the [Fingerprinting and Background Checks](#) section for more information.
3. Shelter staff must post public notice signs in visible right-of-way to the public until licenses are approved by the Anchorage Assembly.

For more information regarding public notice posting requirements please see [AMC Title 21.03.020](#)

## GENERAL VARIANCE/WAIVERS

In accordance to [AMC 16.125.070](#) a homeless or transient shelter may apply to the director of the Anchorage Health Department for a variance or waiver from the standards and requirements of this chapter.

The department may waive a provision of this chapter if it determines that the health and protection of the public and the satisfaction of the purpose of the provision is reasonably assured and the requirements of applicable state and federal law are satisfied.

**Variance:** is a modification to required standards to alleviate hardship or temporary dispensation from a rule/regulation

**Waiver:** is an exemption from a required standard or permanent dispensation from a rule/regulation

### [Variance/Waiver Application](#)

For waivers for barrier crimes, see section [AMC 16.125.050D](#) or the [Barrier Crime Waivers](#) section of this document.

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## INFORMATION NEEDED FOR VARIANCE/WAIVER APPLICATION

This list includes all required information and documentation for the Variance/Waiver Application. The Anchorage Health Department will need the following information:

- Section of the Anchorage Municipal Code 16.125 for which the variance/waiver is being sought
- Description of why the variance/waiver is needed and what if any part of the section can be met to comply with the requirements of AMC 16.125.
  - Describe the extent to which compliance with the requirement would impose any substantial economic, technological, programmatic, legal, and/or medical hardship on the shelter and/or clients.
- Length of time the variance/waiver would be needed
- Document the proposed alternative ways the shelter will meet the requirement in AMC 16.125.

- Provide a statement on how the facility will ensure a high quality of service to clients.  
Provide a statement of assurance that the current conditions at the facility do not present danger or undue hardship to clients or the surrounding neighborhood.
- Any supporting documentation from the appropriate authority, if the request for a variance/waiver involves fire safety, zoning or use, or other state or municipal approvals (if applicable)
- Any additional information to assist the department in determining the effect of this variance/waiver on shelter clients (if applicable)
- Explain any additional information to assist the department in determining the effect of this variance/waiver on shelter clients (if applicable)

## BARRIER CRIME WAIVERS

If a shelter license applicant, any individual on the application as a licensee or any managing member of the applicant has been charged or convicted of a barrier crime pursuant to 7 AAC 10.905 you must apply for a Barrier Crime Waiver. Each individual who has been charged or convicted of a barrier crime must complete their own application.

If you have been charged or convicted of a barrier crime and have been notified you need to apply for a waiver you may not have direct interactions with clients or be on site of the shelter until a determination has been made by the Anchorage Health Department Director. If you must be on site of the shelter for any reason you must be accompanied by someone in your organization with a cleared background check through the Anchorage Health Department or by a member of the Anchorage Health Department. Having a barrier crime does not affect your ability to be employed by your organization.

The director shall review requests for a waiver of the prohibition on barrier crimes restriction submitted to the department. The director may approve a waiver if the director determines the person for whom the waiver is requested demonstrated sufficient rehabilitation or recovery since the conviction, the risk of harm from the waiver applicant to clients or others is sufficiently mitigated, and the director is satisfied client safety is not compromised by granting the waiver. A waiver application may include supporting statements and recommendations from persons familiar with the applicant, proof of completion of a program of rehabilitation or counseling, and any other information supporting the waiver. An appeal from a decision of the director on a variance application shall be afforded in accordance with section [AMC 16.125.090](#).

### [Barrier Crime Waiver Application](#)

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## INFORMATION NEEDED FOR BARRIER CRIME WAIVER APPLICATION

This list includes all required information and documentation for the Barrier Crime Waiver Application. The Anchorage Health Department will need the following information:

- Which city and state the crime(s) were committed
- Date(s) the crime(s) were committed
- Conviction (i.e.; Second Degree Assault, Manslaughter, Indecent Exposure in the First Degree, etc.)
- Short description of any mitigating circumstances to be taken into consideration when reviewing application
- Actions taken by the individual convicted of the barrier crime to reduce risk of reoffending
- Documentation of proof of rehabilitation, prevention and/or treatment (if applicable)

- Two (2) Letters of Recommendation from credible persons who are aware of the individual's criminal and civil history and who would, despite that knowledge, recommend a waiver be granted. At least one letter must be from persons who are unrelated to the individual for whom the waiver is requested.
  - All Letters of Recommendation must contain the following to be accepted:
    - Must be addressed to the attention of the Anchorage Health Department
    - Must be wet signed or DocuSigned verified
- Job description for the individual's position.
  - The job description must have current or potential job duties and responsibilities, including hours and days of service, supervisory status, and whether the individual would be in direct contact with recipients of services.
- Resume of individual convicted of barrier crime
- Description of any additional measures which need to be enforced in order to mitigate the risk of harm to clients or others

It is important to be as detailed as possible and provide sufficient information for the Director to make a determination. You may submit additional documents as needed to support the application.

If you are unsure of what barrier crimes and the times are for your case, please reach out to our office for assistance in identifying those crimes. The Department of Public Safety will send you a copy of your results that the Anchorage Health Department receives. If you do not receive a copy of your background report, please reach out to the Department of Public Safety for assistance.

#### APPLYING FOR A LICENSE – RENEWAL APPLICATION

An application for renewal must be made at least 90 days, but not before 150 days of the expiration of the current license. Renewal applications filed after that time period will be considered delinquent and subject the homeless and transient shelter to potential closure pending approval of the application.

Within 90 days prior to the expiration of the license, it is the responsibility of the licensee to arrange for inspections of the licensed premise.

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#### REQUIRED DOCUMENTS

To renew your shelter license, submit any of the following documents that have had updates made since your last application:

- Articles of Association
- Articles of Incorporation
- Business License
- Bylaws
- Emergency Disaster Plan
  - To include but not limited to: evacuation plans, fires, earthquakes, volcanic eruption and/or ashfall, pandemic or manmade disaster.
- Business License
- Good Neighbor Policy
- Letter of Authorization Allowing Use of Property from Owner of Property

- Operating Agreement
- Partnership Agreement
- Policies and Procedures
  - Client Feedback Collection Methods
  - Deterrents and Reduction of Client Loitering and Prohibited Camping
  - Esurance of Safety for Clients, Staff, and Volunteers
  - Injury and Disease Prevention
  - Method of Screening Individuals Who Are Under the Influence
    - Including Plan to Provide for their Immediate Need if the Shelter will Admit Such Persons
  - Operating Plan
  - Projected Staffing Level
  - Proposed Maximum Stay
  - Rules of Conduct
  - Security Plan for Handling Incidents of Violence
  - Support Services to be Provided
  - Transportation Protocols (Day Shelters Only)
  - Trespass and Admission Denial Criteria
  - Verification of AKHMIS and Coordinated Entry Compliance
- Proof of Accreditation (optional)
- Proof of Insurance

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## PROCESS

After collecting the documents mentioned above, please complete the following:

- Complete the shelter licensing renewal application
  - Applications can be completed electronically or on paper
    - For the online renewal application please visit our website [www.muni.org/Departments/health/HousingAndHomelessness/Pages/ShelterLicensing.aspx](http://www.muni.org/Departments/health/HousingAndHomelessness/Pages/ShelterLicensing.aspx)
    - Paper applications can be downloaded from our website using the link above, you may call to request one be mailed to you or you may pick one up in person from the Anchorage Health Department.
    - Applications will not be accepted until all required documents have been submitted
    - Once application has been accepted shelters must send a representative to pick up a public notice sign to be posted in visible public right-of-way.
- Obtain fingerprints for an independent background check conducted by the Anchorage Health Department.
  - The applicant named on the shelter license and all managing members of the shelter are required to submit fingerprints for background checks.
- Contact the Anchorage Fire Department for an inspection.
  - Once completed, send a copy of the approved final inspection to [ahdshelterlicensing@anchorageak.gov](mailto:ahdshelterlicensing@anchorageak.gov)
    - To schedule your inspection please call the Fire Prevention Division: 907-267-4900

- Schedule a health and safety inspection with the Anchorage Health Department, Housing and Homelessness Services team
  - To schedule you may call 907-343-6722 or email [ahdshelterlicensing@anchorageak.gov](mailto:ahdshelterlicensing@anchorageak.gov)
- Once all the above steps have been completed, your complete packet will be submitted to the following departments for approval:
  - Anchorage Fire Department
  - Risk Management (Insurance Review)
  - Land Use Enforcement (Zoning Review)
  - Housing and Homelessness Services Division Manager
  - Anchorage Health Department Director
- After approval from all municipal departments, the application will be complete, and a renewal license will be issued for three (3) years.

## APPEALING DECISIONS MADE BY THE ANCHORAGE HEALTH DEPARTMENT

If you receive a denial of licensing, denial of any waivers/variances, or fines you may appeal the decision with the [Municipality of Anchorage – Administrative Hearing Office](#).

You will have fifteen (15) days from the notice to file an appeal, after that the action will stand.

If you have any questions about this process, contact their office for more information:

632 West 6<sup>th</sup> Ave, Suite 740 (City Hall)  
Anchorage, AK 99501  
Office: 907-343-4535  
Fax: 907-343-4541

### **Hours of Operation:**

Monday through Friday (Closed Municipal Holidays)  
Office: 8:00am to 4:30pm  
By Phone: 8:00am to 5:00pm