## HARBOR REGIONAL CENTER STATEMENT OF OBLIGATION

(Please attach additional pages if needed)

1.	The applicant is presently providing services to individuals with developmental disabilities:  \[ \subseteq \text{ Yes}  \subseteq \text{ No} \]
	If YES, please indicate name, location, type, and capacity of services:
2.	The applicant is presently providing to individuals other than those with intellectual and developmental disabilities:     Yes  No  If YES, please indicate name, location, type, and capacity of services:
3.	Is the applicant currently receiving grant money/funding from any other sources to develop services for individuals with intellectual and developmental disabilities?   Yes  No  If YES, indicate funding source and scope of grant project.
4.	The applicant is planning to expand existing services (through a Letter of Intent and with or without grant funds) from a source other than Harbor Regional Center during Fiscal Year 2023-2024:  Yes No  If YES, please explain in detail.
5.	Describe other professional/business obligations. Include name, location, type, and capacity of service/obligation. Do not include services you expect to provide if awarded this grant.
6.	Has the applicant or any member of the applicant's organization received a citation from a regional center or state licensing agency within the last two (2) years?  Yes No  If YES, please explain in detail.
7.	Has the applicant or a member of the applicant's organization or staff ever received a citation from any agency for abuse?  \[ \subseteq \text{Yes} \subseteq \text{No} \]  If <b>YES</b> , please explain in detail.