

# NOTIFICATION OF INCOMPLETE APPLICATION

DATE:
FACILITY NAME:
FACILITY FILE NUMBER:

- This incomplete application package is being returned to you. Items in Section A and B must be properly completed and submitted as a total package.
- Your application for a license remains incomplete as we have not received the items checked below. Please forward the requested information within 30 days, or bring the information to the face-to-face interview scheduled on \_\_\_\_\_. If this information is not received, your application will be considered withdrawn.

## SECTION A — LICENSING FORMS

- A1. Application for Facility License (LIC 200 or LIC 200A)
- A2. Applicant Information (LIC 215)  
For: \_\_\_\_\_  
NAME OF PERSON(S)
- A3. Designation of Administrative Responsibility (LIC 308)
- A4. Administrative Organization (LIC 309)
- A5. Affidavit Regarding Client/Resident Cash Resources (LIC 400)
- A6. Estimated Monthly Operating Budget (LIC 401)
- A7. Surety Bond (LIC 402)
- A8. Financial Statement (LIC 403)
- A9. Financial Information Release and Verification (LIC 404)
- A10. Budget Information (LIC 420)
- A11. Personnel Report (LIC 500)
- A12. Personnel Record (LIC 501)
- A13. Health Screening Report — Facility Personnel (LIC 503)  
For: \_\_\_\_\_  
NAME OF PERSON
- A14. Emergency Disaster Plan (LIC 610 or LIC 610A)
- A15. Facility Sketch (LIC 999)
- A16. Local Fire Inspection Authority Information (LIC 9054)

## SECTION B — SUPPORTIVE DOCUMENTS

- B1. Partnership Agreement/Articles of Incorporation
- B2. Verification of Administrator/Director Qualifications
- B3. Verification Social Worker Qualifications
- B4. Job Description — each position
- B5. Personnel Policies
- B6. Inservice Training for Staff
- B7. Facility Program Description
- B8. Rules of Discipline
- B9. Admission Policies
- B10. Sample Menu
- B11. List of Indoor/Outdoor Play Equipment and Inventory of Furniture
- B12. Control of Property
- B13. Bacteriological Analysis of Private Water Supply (When Water for Human consumption is from a Private Source).
- Other \_\_\_\_\_

**The Application Fee Is Non-Refundable**

LICENSING EVALUATOR'S SIGNATURE

PHONE NUMBER

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