

FACILITY VISIT CHECKLIST ADULT RESIDENTIAL FACILITY

Review facility file prior to visit. Check to see that the following information has been updated, if required, and contained in the file. Indicate the date the information was submitted to the licensing agency in the space provided for each item requested.

	ON FILE	DATE REQUESTED	DATE RECEIVED
License Fee			
Criminal Record Clearance (updated for current staff subject to fingerprint requirements)			
Licensee Affidavit Regarding Persons Exempt From Fingerprint Requirements (if not on LIC 500)			
Administrative Organization (LIC 309)*			
Designation of Administrative Responsibility (LIC 308)*			
Personnel Report (LIC 500) Updated*			
Affidavit Regarding Client/Resident Cash Resources (LIC 400)*			
Surety Bond (LIC 402) - (if applicable)			
Facility Floor/Plot Plan (LIC 999)			
Fire Clearance (consistent with terms and limitations of license)			
Qualifications of Administrator/Social Worker/Facility Manager			
Articles of Incorporation/Organization, Constitution and Bylaws (if applicable)			
Partnership Agreement (if applicable)			
Control of Property			
Emergency Disaster Plan (LIC 610D)			
Plan of Operation			
Admission Policies and Procedures			
Health Screening Report - Facility Personnel (LIC 503)			
Bacteriological Analysis of Private Water Supply (if applicable)			
Inservice Training Program			
Medication Procedures			
Transportation Procedures			
Job Description/Personnel Policies			
Exemptions, Waivers and Exceptions			

NOTES AND COMMENTS

*Other verifying documents may be substituted for these LIC forms