

AFFIDAVIT

Notice to Applicant

I agree to notify the Department if there is any change in the information required to be included in the statement of ownership thirty (30) days in advance of such change (ODH Form 953-B, ODH 953-C). I agree to provide notice to the Department thirty (30) days prior to finalizing any transfer of ownership and operation and shall remain responsible for the operation until such time as a probationary license is issued to the transferee.

63 O.S. Section 1-832.A(6)(7) *No person shall willfully file any false, incomplete or intentionally misleading information required to be filed pursuant to the provisions of the Residential Care Act or willfully fail or refuse to file any information required by the Department pursuant to the provisions of the Residential Care Act or open or operate a home without a license. Operation of a residential care home without a license is a public health emergency warranting action pursuant to the provisions of Section 1-830 of this title.*

63 O.S. Section 1-832.C *Any person who violates any of the provisions of the Residential Care Act, upon conviction, shall be guilty of a misdemeanor. Each day upon which such violation occurs shall constitute a separate violation.*

OAC 310:680-3-3(g) *If the applicant is a firm, partnership or corporation, the application shall include an attested statement from each member of the firm or partnership and from each officer and major stockholder of the corporation.*

I attest that I have not been convicted of a felony in connection with the operation or management of a home, or facility as defined in Title 63 O.S. Section 1-1902 in Section 1-1902 of Title 63 of the Oklahoma Statutes or the care and treatment of the residents of a home, or facility as defined in Section 1-1902 of Title 63 of the Oklahoma Statute [63:1-822.D].

I certify the information provided in this application and attachments are true and complete to the best of my knowledge and belief.

Typed or Printed Name of Person Signing for Applicant

Signature of Applicant

Name of Corporation, Partnership or Association

Official Title or Position

State of _____

County of _____

Signed and sworn to (or affirmed) before me on this _____ day of _____, 20____.

Name(s) of person(s) making statement.

Seal or Stamp

Signature of Notary Public

My Commission Expires: _____ / _____ / _____

My Commission Number is: _____

PART I

PROBATIONARY LICENSE APPLICATION

If the applicant has not been previously licensed, or the home is not in operation, complete the following:

1. Include a \$50.00 Fee (120 day license) with the application.
2. Complete and attach *Residential Care Home License Application* (ODH Form 728), *Disclosure Statement of Owners, Lessee and Manager for a Long-Term Care Facility* (ODH Form 953-B), *Detail Attachment to the Disclosure Statement* (ODH Form 953-C), and *Staffing Projection and Professional Certification for a Nursing or Long-Term Care Facility*, (ODH Form 953-E), items 1 and 2, to include page 2 certification by applicant. **Note: ODH Form 728, page 2, must be completed by all parties to the applicant (licensee) listed on ODH Form 953-C.**
3. Attach a statement from city or local zoning authority that states that the address of the home's location is zoned appropriately for licensure as a residential care home. The letter must include the home's maximum bed capacity.
4. Attach drawing of floor plan of the home. (One time only unless changes are made to the facility.)
5. Attach current physician's agreement to provide emergency medical services and consultation (required annually).
6. Attach licensed plumber or building inspection report (required annually).
7. Attach licensed electrician or municipal inspector's report (required annually).
8. Attach pharmacist or registered nurse consultant agreement (if medications are administered, required annually).
9. Attach Registered Dietician Consultant Agreement. (If you have residents who are on special diets, required annually.)
10. Attach a complete list by name, title, education, experience, qualification, and copies of licenses of all employees.
11. Attach description of applicant's qualifications to include a list of names and address of all long term care homes or facilities in which the applicant has a full or partial interest.
12. Attach applicant's financial statement and facility's projected budget of revenues and expenses for first month of operation.
13. If home is leased, provide notarized copy of lease agreement.
14. Attach copy of administrator's certificate and annual continuing education certificates.
15. Attach documentation of the inspection and approval by the State Fire Marshal or the State Fire Marshal's representative.
16. Attach copy of resident contract, which must include resident's rights, description of services provided, rates charged for those services, and items for which residents may be separately charged.

PART II

RENEWAL APPLICATION

1. Complete and return *Residential Care Home License Application* (ODH Form 728), *Disclosure Statement of Owners, Lessee and Manager for a Long-Term Care Facility* (ODH Form 953-B), *Detail Attachment to the Disclosure Statement* (ODH Form 953-C), and *Staffing Projection and Professional Certification for a Nursing or Long-Term Care Facility*, (ODH Form 953-E), items 1 and 2, to include page 2 certification by applicant. **All parties to the applicant (licensee) must complete ODH Form 728, page 2.**
2. Include a \$50.00 fee with the application.
3. Submit items 5-9 and item 15 from Part I above.
4. Attach documentation of the annual inspection and approval by the State Fire Marshal's or the State Fire Marshal's representative for homes with more than six beds.

PART III

MODIFICATION TO LICENSE

1. Complete and submit *Residential Care Home License Application* (ODH Form 728), *Disclosure Statement of Owners, Lessee and Manager for a Long-Term Care Facility* (ODH Form 953-B), *Detail Attachment to the Disclosure Statement* (ODH Form 953-C), and *Staffing Projection and Professional Certification for a Nursing or Long-Term Care Facility*, (ODH Form 953-E), items 1 and 2, to include page 2 certification by applicant. **All parties to the applicant (licensee) listed on ODH Form 953-C must complete ODH Form 728, page 2.**
2. Include a \$20.00 fee with the application.
3. For bed additions, provide items 3, 4 and 15 from Part I above.