

## Congregate Living Health Facility (CLHF) and Pediatric Day Health and Respite Care Facility (PDHRC) Report of Change Application Checklist for Change of Name

The following is a list of application forms and supporting documents required for a complete application packet. Failure to include each of these items will delay processing.

Check all that apply:   Facility   Licensee	

**CHECKLIST AND INTRUCTIONS -** *Please submit your documents in this order.* 

## REQUIRED DOCUMENTS TO CHANGE THE NAME OF THE FACILITY OR LICENSEE

INEQUINED DOO	CIVICIAI	S TO CHANGE THE NAME OF THE FACILITY OR LICENSEE
space to supp	ns and orting ments	Additional Instructions (Each form has instructions on the form)
Co	over	COVER LETTER  Letter on company letterhead with the following information:  License number  Facility name and address  Indicate if the change of the name is for the Licensee and/or the Facility  Facility ID number (if known)  Brief description of request.  Previous and proposed/new name  Contact information (name, title, phone number, and e-mail address)  Emergency Contact Information (name, email, alternate email, phone, fax, and phone number that will receive text messages). The Department will use this information to contact the provider in the event of an emergency using the California Health Alert Network (CAHAN). All information provided must allow CAHAN to contact the provider on a 24/7/365 basis for distribution of health alerts. For additional information: CAHAN (https://www.calhospitalprepare.org/cahan)  Signature



Use this space to check if included	Forms and supporting documents	Additional Instructions (Each form has instructions on the form)
	HS 200	LICENSURE & CERTIFICATION APPLICATION CLHF and PDHRC: [Title 22 of the California Code of Regulations (CCR) section 72201(b)(3) and 72211(a)] CLHF: [Health and Safety Code (HSC) section 1267.13(n)] PDHRC: [HSC section 1760.4(c)]
		Page 1, section A, items 1(d) and 4(j) — Indicate if the change of the name is for the Licensee and/or the Facility
		Tips
		<ul> <li>Page 2, section B, item 6 — An organization must own 100 percent of the licensee to be considered a parent company. This parent company will have its own Employer Identification Number (EIN)</li> <li>Page 3, section C, item 7 — When listing the names of individuals owning direct or indirect ownership of the facility in section C, provide the EIN (do not enter a Social Security number in this field)</li> </ul>
	Supporting Documents	BOARD RESOLUTION CLHF: [HSC 1265(i)] PDHRC: [HSC section 1762(a)]
		Submit a copy of board resolution signed by officers and directors authorizing the facility name change and with the effective date
	Supporting Documents	ARTICLES OF INCORPORATION CLHF: [HSC 1265(i)] PDHRC: [HSC section 1762(a)]
		If the Licensee name or Corporate name changes, submit a copy of amended Articles of Incorporation filed with the CA Secretary of State
		NOTE: In case of entity conversion, submit a copy of <u>conversion</u> <u>document</u> filed with the CA Secretary of State