

Change of Information Form

Name of Facility _____ License # _____

Address: _____

Removal of a service or reduction in capacity.

service being removed: _____ new reduced capacity: _____

Capacity increase. Increase is effective when the following are received and approved by the Licensing Section and the new space shall not be utilized until approval has been granted by the Licensing Section:

- \$25 non-refundable change fee; an additional fee may be required based on capacity;
- current Office of the State Fire Marshal approval for new space;
- current Office of Public Health approval for new space;
- current city fire approval for new space (if applicable); and
- measurement of the additional space by Licensing Section staff.

Name change. Change is effective when the following are received by the Licensing Section:

- new name requested: _____; and
- \$25 non-refundable change fee.

Age range change for residents/children. Change is effective when the following are received and approved by the Licensing Section:

- new age range requested: _____ ;
- \$25 non-refundable change fee; and
- inspection by Licensing noting compliance with regulations regarding the age of children to be served.

Change to add the service of acceptance of minor children of residents in a child residential program. Change is effective when the following are received and approved by the Licensing Section:

- \$25 non-refundable change fee;
- current Office of the State Fire Marshal approval noting acceptance of infants or children of residents;
- current Office of Public Health approval noting acceptance of infants or children of residents; and
- inspection by Licensing noting compliance with regulations regarding the infants or children of residents.

Change in program director. Change is effective when the following are received and approved by the Licensing Section:

- new program director: _____ -date of hire with agency: _____
- documentation of program director's qualifications; -date of hire as program director: _____
- three signed letters of reference dated within twelve months prior to hire attesting affirmatively to his/her character, qualifications, and suitability to manage the program;
- satisfactory SCR clearance form from Child Welfare dated no earlier than 45 days of the individual being present in the facility/hired; and
- satisfactory criminal background check dated no earlier than 45 days prior to date of hire.

Change to add a service in a child placing agency. Change is effective when the following are received and approved by the licensing section:

- requesting to add: adoption services foster care services transitional placing
- \$25 non-refundable change fee;
- inspection and approval by Licensing noting compliance with foster care and/or adoption regulations for the service requesting to be added;
- if adding transitional placing, denote physical location(s) of housing unit(s) below and obtain the following information:
 - _____
 - current Office of the State Fire Marshal approval for new location (if providing care for four or more youth at this location);
 - current Office of Public Health approval for new location;
 - current zoning approval for new location (if applicable);
 - current city fire approval for new location (if applicable and providing care for four or more youth at this location);
 - city or parish building permit approval for new construction or renovations;
 - copy of property insurance or rental insurance coverage for each transitional placing location; and
 - inspection and approval by Licensing noting compliance with regulations

Change to remove/add a location under your current child placing agency-transitional placing license. Change is effective when the following are received and approved by the licensing section:

- address of the transitional placing location to be removed (if applicable) _____
- if adding a transitional placing location include the physical address(s) of housing units below:

- current Office of the State Fire Marshal approval for new location (if providing care for four or more youth at this location);
- current Office of Public Health approval for new location;
- current zoning approval for new location (if applicable);
- current city fire approval for new location (if applicable and providing care for four or more youth at this location);
- city or parish building permit approval for new construction or renovations;
- copy of property insurance or rental insurance coverage for each transitional placing location; and
- inspection and approval by Licensing noting compliance with regulations

Change to remove an individual from the existing ownership structure. Change is effective when the following are received and approved by the licensing section:

- name of the individual(s) being removed

- Effective date of removal: _____

Change to add an individual to the existing ownership structure. Change is effective when the following are received and approved by the licensing section:

- name of the individual(s) being added _____
- Effective date of addition: _____

Signature

Date

Phone

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