

APPLICATION FOR COMMUNITY CARE FACILITY LICENCE

The personal information collected relates directly to and is necessary for program operation as outlined in the *Community Care and Assisted Living Act*. Information that appears on a licence may be disclosed per Section 22(4)(i) of the *Freedom of Information and Protection of Privacy Act*, as it is not considered an unreasonable invasion of personal privacy If you have any questions about the collection and use of this information, contact the Island Health , Information and Privacy Office, at 250.370.8323.

						COMPLETELY FILLING IN THE APPROPRIATE	DUXES
STATUS							
NEW1. FACILITY INFORMA	FACILITY	LICENSEE		OCATIO	ON		
FACILITY INFORMATION OF THE PROPERTY OF THE PR	ATION				Water Sour	ro.	
FACILITY LOCATION ADDRESS						UNITY (SYSTEM NAME) WELL OTHER (SP	ECIFY):
CITY	PROV	POSTA	AL CODE		Sewage Dis	posal SEWER ONSITE SEWAGE DISPOSAL	
			TE CODE		Will your fa	cility be providing full meals/food service? 🔲 Y	ES NO
TELEPHONE	FAX	EMAIL			Is your facil	ity located in an Indigenous Community? YE	S NO
FACILITY MAILING ADDRESS IF	DIFFERENT FROM ABOVE:				Yes, please	state Community name:	
2. LICENSEE INFORM	ATION						
LICENSEE NAME					SOCIE	TY SOLE PROPRIETOR PARTNERSHIP	INCORPORATED
MAILING ADDRESS					П ОТНЕ	R (SPECIFY):	
CITY	PROV	DOCT	TAL CODE		FOR P		
CIT	PROV	F031	AL CODE			isee or a Board Member at least 19 Years Old?	→ YES └─ NO
TELEPHONE	FAX	EMAIL				nization Registered? YES NO	
LICENSEE CONTACT		PHONE			Has The Lic	ensee Previously Applied To Be A Licensee or Ma	nager of a
						y Care Facility? YES NO	
3. FACILITY MANAGE MANAGER NAME	R INFORMATION						
					Is the Man	ager at least 19 Years Old? YES NO	
MANAGER MAILING ADDRESS						ager Currently the Manager of Any Other y Care Facility?	
CITY	PROV	POST	AL CODE				
TELEPHONE	TELEPHONE FAX EMAIL				Has the Manager Previously Applied to be a Licensee or Manager of a Community Care Facility? YES NO		
4. BUILDING INFORM	IATION						
IF THE FACILITY IS PART OF A M	IALL, NAME OF MALL				RIJII DII	NG OWNER information same as Facility Owner	
BUILDING NAME (IF DIFFERENT FROM FACILITY)					Child Care Only - If not the building owner [renting/leasing], Applicants		ngl. Applicants
			TAL CODE	must provide Licensing written confirmation that the Landlord is aw		dlord is aware tha	
ADDRESS	CITY	POS	TAL CODE		_		_
					BUILDII	NG/PROPERTY address information same as Facili	y address
5. OWNER OF BUILDI REGISTERED NAME	NG/COMPLEX & CONTA	ACT FOR BUILDING	G				
MAILING ADDRESS						Y SOLE PROPRIETOR PARNTERSHIP (SPECIFY)	INCORPORATED
			TAL CODE				
CONTACT/AGENT NAME		POSITION				lity located in an Indigenous Community?	NO NO
TELEPHONE	FAX	EMAIL				c state community name.	
6. PROPOSED SERVIC					ii yes, pieas		
	E – Check the applicabl		ude the propo	sed ca			
Child Care			ude the propo Capacity			Residential Care	Capacity
□ 301 - Group Child Car	re (Under 36 Months)	le service and inclu			acity	400 – Long Term Care Funded	Capacity
□ 301 - Group Child Car □ 302 - Group Child Car	re (Under 36 Months) re (30 Months to School Ag	le service and inclu			acity	U 400 − Long Term Care Funded U 401 − Long Term Care Non-Funded	Capacity
□ 301 - Group Child Car □ 302 - Group Child Car	re (Under 36 Months) re (30 Months to School Ag Months to School Age)	le service and inclu			acity	400 – Long Term Care Funded	Capacity
□ 301 - Group Child Car □ 302 - Group Child Car □ 303 – Preschool (30 N	re (Under 36 Months) re (30 Months to School Ag Months to School Age) re	le service and inclu			acity	□ 400 − Long Term Care Funded □ 401 − Long Term Care Non-Funded □ 410 − Community Living	Capacity
□ 301 - Group Child Car □ 302 - Group Child Car □ 303 - Preschool (30 N □ 304 - Family Child Ca	re (Under 36 Months) re (30 Months to School Ag Months to School Age) re re (School Age)	le service and inclu			acity	400 – Long Term Care Funded 401 – Long Term Care Non-Funded 410 – Community Living 420 – Mental Health	Capacity
301 - Group Child Car 302 - Group Child Car 303 - Preschool (30 N 304 - Family Child Ca 305 - Group Child Ca 308 - Occasional Chil 309 - Child-minding	re (Under 36 Months) re (30 Months to School Age) Months to School Age) re re (School Age) d Care	le service and inclu			acity	400 – Long Term Care Funded 401 – Long Term Care Non-Funded 410 – Community Living 420 – Mental Health 421 – Substance Use 440 – Acquired Injury 450 – Hospice	Capacity
□ 301 - Group Child Car □ 302 - Group Child Car □ 303 - Preschool (30 N □ 304 - Family Child Ca □ 305 - Group Child Ca □ 308 - Occasional Chil □ 309 - Child-minding □ 310 - Multi-Age Child	re (Under 36 Months) re (30 Months to School Age Months to School Age) re re (School Age) d Care	le service and inclu			acity	400 – Long Term Care Funded 401 – Long Term Care Non-Funded 410 – Community Living 420 – Mental Health 421 – Substance Use 440 – Acquired Injury	Capacity
□ 301 - Group Child Car □ 302 - Group Child Car □ 303 - Preschool (30 N □ 304 - Family Child Ca □ 305 - Group Child Ca □ 308 - Occasional Chil □ 309 - Child-minding □ 310 - Multi-Age Child □ 311 - In-Home Multi-	re (Under 36 Months) re (30 Months to School Age Months to School Age) re re (School Age) d Care I Care Age Child Care	le service and inclu			acity	400 – Long Term Care Funded 401 – Long Term Care Non-Funded 410 – Community Living 420 – Mental Health 421 – Substance Use 440 – Acquired Injury 450 – Hospice	Capacity
□ 301 - Group Child Car □ 302 - Group Child Car □ 303 - Preschool (30 N □ 304 - Family Child Ca □ 305 - Group Child Ca □ 308 - Occasional Chil □ 309 - Child-minding □ 310 - Multi-Age Child □ 311 - In-Home Multi- □ 312 - School Age Care	re (Under 36 Months) re (30 Months to School Age) re re (School Age) d Care d Care d Care d Care e on School Grounds	le service and inclu			acity	400 – Long Term Care Funded 401 – Long Term Care Non-Funded 410 – Community Living 420 – Mental Health 421 – Substance Use 440 – Acquired Injury 450 – Hospice	Capacity
□ 301 - Group Child Car □ 302 - Group Child Car □ 303 - Preschool (30 N □ 304 - Family Child Ca □ 305 - Group Child Ca □ 308 - Occasional Chil □ 309 - Child-minding □ 310 - Multi-Age Child □ 311 - In-Home Multi-	re (Under 36 Months) re (30 Months to School Age) re re (School Age) d Care d Care d Care d Care e on School Grounds	le service and inclu			acity	400 – Long Term Care Funded 401 – Long Term Care Non-Funded 410 – Community Living 420 – Mental Health 421 – Substance Use 440 – Acquired Injury 450 – Hospice	Capacity
301 - Group Child Car 302 - Group Child Car 303 - Preschool (30 M 304 - Family Child Ca 305 - Group Child Ca 309 - Child-minding 310 - Multi-Age Child 311 - In-Home Multi- 312 - School Age Care 313 - Recreational Ca	re (Under 36 Months) re (30 Months to School Age) re re (School Age) d Care d Care d Care d Care e on School Grounds	le service and inclu	Capacity		acity	400 – Long Term Care Funded 401 – Long Term Care Non-Funded 410 – Community Living 420 – Mental Health 421 – Substance Use 440 – Acquired Injury 450 – Hospice 500 – Child and Youth Residential	Capacity
301 - Group Child Car 302 - Group Child Car 303 - Preschool (30 N 304 - Family Child Ca 305 - Group Child Ca 308 - Occasional Chil 309 - Child-minding 310 - Multi-Age Child 311 - In-Home Multi- 312 - School Age Care 313 - Recreational Ca Maximum Capacity Months of Operation	re (Under 36 Months) re (30 Months to School Age) re re (School Age) d Care d Care d Care d Care e on School Grounds	le service and inclu	Capacity Days of Operation	ation	pacity Room #	400 – Long Term Care Funded 401 – Long Term Care Non-Funded 410 – Community Living 420 – Mental Health 421 – Substance Use 440 – Acquired Injury 500 – Child and Youth Residential	
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