Current Licensee Notice – Skilled Nursing Facility Change Of Ownership

Pursuant to licensing requirements, a license shall not be transferable. A change of ownership must be reported to the California Department of Public Health (CDPH) at least 120 calendar days prior to the anticipated change of ownership (CHOW). An applicant seeking licensure for a skilled nursing facility (SNF) must obtain approval from CDPH.

seeking hochsure for a skilled harsing facility (Orth) must obtain approval	
This form is to be completed by the current licensee to report the propose	d CHOW of the SNF listed below as required by state law
The date of the anticipated CHOW is:	
Facility Name:	
Facility Address:	
City:	
Current Licensee Name:	
Current Owner(s) Name:	
Proposed Licensee Name:	
Proposed Owner(s) Name:	
Signature and printed name of person signing this form with authority to legally bind the Licensee:	
Authorized Signature:	Signature Date:
Authorized Signer's Printed Name:	Title:

Return signed copy to CDPH at the address listed below:

California Department of Public Health License and Certification Division Centralized Applications Branch P.O. Box 997377, MS 3207 Sacramento, CA 95899-7377

Instructions

Type or print clearly. Complete all items. Do not leave items blank.