



Assisted Living Facilities NOTIFICATION OF CHANGE OF ADMINISTRATOR

AUTHORITY: In accordance with Section 429.11(1), Florida Statutes (F.S.) and 58A-5.019(1), Florida Administrative Code (F.A.C.), each assisted living facility must identify the administrator of the facility and each facility that he/she currently operates. Your social security number will be used to secure the proper identification of the person listed on this document for licensure, criminal background checks, and the indexing of controlling interests.

Facility Information

ALF License #:			
Assisted Living Facility Name		Telephone Number	
Street Address		Fax	
City	County	State	Zip
Email Address			

New Administrator Personal Information

Effective Date of Change:			
Administrator Name		Social Security Number	Date of Birth
Mailing Address	Email Address		Telephone Number
City	County	State	Zip

NOTE: Pursuant to Section 408.809, Florida Statutes, all facility administrators are subject to Level 2 background screening. Please review the information available at: http://ahca.myflorida.com/MCHQ/Central_Services/Background_Screening/

A. Does the administrator have a high school diploma or GED certificate? YES NO GED
Please attach a copy of the high school diploma or GED certificate.
Failure to do so may result in a Complaint Investigation.

B. Is the administrator a licensed Nursing Home administrator Pursuant to Chapter 468, Part II Florida Statutes?
 YES NO If Yes, License Number: _____

C. Is the administrator Core Trained? YES NO
If Yes, Provide ID Number: _____

D. Will the administrator be serving as the administrator for more than this ALF? YES NO
Note: An administrator may manage a maximum of 3 ALFs.

If yes, please complete the following:

Name of Facility	License Number

PRINT the Name of Licensee or Authorized Representative

Signature of Licensee or Authorized Representative

Title

Date

Send completed forms to: Agency for Health Care Administration, Assisted Living Unit, 2727 Mahan Drive, Mail Stop 30, Tallahassee, FL 32308 or email completed forms to: assistedliving@ahca.myflorida.com

Questions?

Review the information available at <http://ahca.myflorida.com/>
or contact the Assisted Living Unit at:
Phone: (850) 412-4304
Fax: (850) 922-1984
Email: assistedliving@ahca.myflorida.com