
GENERAL INSTRUCTIONS

Reference Guide

To assist you with your application, please review the [Application Guide](#) before completing this form.

The guide contains helpful information about fees and identifies the supporting documents that must be submitted with this form. Definitions of terms used in this form are provided in the [Application Guide](#).

While completing this form, you may:

1. View definitions by clicking words or phrases that appear in [orange](#)
2. Access other resources by clicking resource names that appear in [blue](#)

Required Information and Supporting Documents

All fields in this form are mandatory and relevant information must be provided.

Additional supporting documents required with this application are listed in this form. If required documents, such as an occupancy permit, approved fire safety plan, municipal licence or contractor's material test certificate, are not currently available, the Applicant can still submit the application and advise the RHRA of the anticipated date(s) of submission.

The RHRA may contact the Applicant to request more information or other supporting documents.

Application Processing

The [standard](#) licence application processing time is six to eight weeks following the submission of a complete application.

[Expedited](#) application fees can be paid in addition to the licence application fee if an Applicant requires priority consideration for an application to be processed within two or four weeks ahead of the standard licence application processing time. If an expedited service is requested, an expedited application fee must be submitted concurrently with the licence application fee.

Application Submission and Fees

Once completed, please save and email this New Operation Licence Application Form and all supporting documents no later than six weeks prior to the occupancy date of the Retirement Home. Failure to submit this form by the deadline may result in a delay in issuing a licence.

Applications received less than six weeks prior to the occupancy date of the Retirement Home may be reviewed on an expedited basis and are subject to a fee.

The RHRA will not begin to process an application before receiving all application fees. Current licence application fees are set out in the RHRA's [Fee Schedule](#). All fees are non-refundable.

RHRA Retirement Home Database

The RHRA requires information related to the management and operation of the home. This information will be posted on the RHRA's [Retirement Home Database](#) and must be kept current. [Retirement Home Database](#) is a database of all Retirement Homes that includes:

- Retirement home's name and address
- Care services provided in each home
- Occupancy capacity of each home
- Summaries of each home's inspection reports
- Any orders imposed on licensed homes under the Act

RHRA must be notified regarding any information changes via email at licensing@rhra.ca or by completing a [Notice of Change](#) Form.

HOW TO SUBMIT THIS FORM

The completed form may be mailed/faxed or emailed to:

Retirement Homes Regulatory Authority

Attention: Licensing Intake
55 York Street, Suite 700
Toronto, ON M5J 1R7
Fax: 1-855-631-0170
Email: licensing@rhra.ca

To create an email with this completed form attached, you may click the Submit Form button included at the end of this form.

RETIREMENT HOME INFORMATION

What official language will the Retirement Home use for its daily operation?

English French If other, specify: _____

Operating name of the Retirement Home: _____

Website address: _____

Phone number: _____

Fax number: _____

Preferred language of communication with the RHRA: English French

Preferred communication method with the RHRA: Email Phone

Expected occupancy date, when residents will move into the new Retirement Home: _____

Physical Address of the Retirement Home

Street Number/Name: (P.O. Box and RR#, if applicable) _____

City, Town, or Village: _____

Postal Code: _____

Is this address the Applicant's mailing address? Yes No

APPLICANT / BUSINESS INFORMATION

What is the ownership structure of the Applicant applying for this Retirement Home licence?

Sole Proprietorship

Corporation

Partnership

Primary Contact

Designated **Primary Contact Person** for the **Applicant**.

First Name: _____ Middle Initial: _____

Last Name: _____ Preferred Salutation: _____

Title / Role: _____

Professional Qualifications, if any: _____

Email address: _____

Phone number: _____ Fax number: _____

Personal History Reports are required as follows:

Sole Proprietorship:

1. **Personal History Report – Individual:** **The business owner** must complete and sign this form.
To access this form, click [here](#).

Partnership / Corporation:

1. **Personal History Report – Individual:** All officers and directors of a corporation, and all individuals with a controlling interest must complete and sign this form.
To access this form, click [here](#).
2. **Personal History Report – Corporate:** Each Applicant Corporation and each Corporation with a controlling interest in the Applicant must complete this form.
To access this form, click [here](#).

RETIREMENT HOME SECTOR EXPERIENCE

The RHRA requires information related to the Applicant’s experience in the Retirement Home and/or related sectors. Does the Applicant have an existing licence for a Retirement Home(s) in Ontario?

Yes No

If yes, what is the licence number of a Retirement Home under the Applicant’s control?

HOME ADMINISTRATION / MANAGEMENT

The RHRA requires information related to the management and operation of the home. This information is posted on the RHRA’s [Retirement Home Database](#) and must be kept current.

Who will have the primary responsibility for managing the day-to-day operations or most of the operations of the home?

Primary Contact Person Staff Member (Including a contract employee) Management Company

HOME INFORMATION – NUMBER OF SUITES

Number of **suites** will be in the home?

Estimate the number of total suites if the final figure is still unknown. Note: The New Operation Licence Application fee is, in part, based on the number of suites in the home.

What is the total number of residents that the home will be able to accommodate?

Consider how many suites are double occupancies and factor that in when providing the resident capacity number.

Will the home have **subsidized suites**?

Yes

No

SPRINKLER INFORMATION WITHIN THE RETIREMENT HOME

Do all residential units/suites have fully **automatic sprinklers**?

Yes

No

If you responded No, please provide an explanation:

CARE SERVICES OFFERED WITHIN THE RETIREMENT HOME AND MANAGEMENT

Who has primary responsibility for managing the staff member(s) overseeing the home's care services?

First Name: _____ Middle Initial: _____

Last Name: _____ Preferred Salutation: _____

Title / Role: _____

Professional Qualifications, if any: _____

Email address: _____ Phone number: _____

Who will be overseeing/responsible for the home's assessment and plan of care activity?

Name: _____ Position: _____

Affiliate College¹: _____ Registration Number: _____

What care services will the Retirement Home make available to residents? Select all that apply.

- Assistance with bathing
- Assistance with ambulation
- Continence care
- Provision of a meal
- Assistance with dressing
- Assistance with feeding
- Assistance with personal hygiene
- Skin and wound care programs

If available, who will be overseeing/responsible for the home's skin and wound care programs?

Name: _____ Position: _____

Affiliate College²: _____ Registration Number: _____

Administration of drugs or another substance

If available, who will be overseeing/responsible for the administration of drugs or another substance?

Name: _____ Position: _____

Affiliate College³: _____ Registration Number: _____

Dementia care program

If available, who will be overseeing/responsible for the home's dementia care program?

Name: _____ Position: _____

Affiliate College⁴: _____ Registration Number: _____

Any service a member of the College of Physicians and Surgeons provides while engaging in the practice of medicine

Any service a member of the Ontario College of Pharmacists provides while engaging in the practice of pharmacy

Any service a member of the College of Nurses of Ontario provides while engaging in the practice of nursing

DISCLOSURE OF NON-ARM'S LENGTH RELATIONSHIPS WITH CARE SERVICE PROVIDERS

Does the Applicant have any non-arm's length relationships with care service providers?

Yes

No

SAFETY AND MANDATORY POLICIES

Public Health: Has the Applicant been subject to any orders, tickets, or charges under the Health Protection and Prevention Act, 1990?

Yes

No

Describe the orders, tickets, or charges. (Provide specific details)

What is the current status of the orders, tickets, or charges? (Provide specific details)

Fire: Has the Applicant been subject to any orders, tickets, or charges under the Fire Protection and Prevention Act, 1997?

Yes

No

Describe the orders, tickets, or charges. (Provide specific details)

What is the current status of the orders, tickets, or charges? (Provide specific details)

Provide copies of the orders, tickets, or charges. (Attach files to application email.)

Privacy Notice

The RHRA is collecting and using the information on this form pursuant to the [Retirement Homes Act, 2010](#), including its regulations. The RHRA is gathering the information to determine eligibility for a retirement home licence and to assist the RHRA in administering the Act.

To complete or verify the information, it may be necessary for the RHRA to request and receive additional information from other sources, including provincial or municipal government departments and agencies, licensing and regulatory bodies, and law enforcement agencies.

The RHRA will collect, use and disclose the information in accordance with its Privacy and Access Code and the Retirement Homes Act, 2010, which requires the RHRA to keep confidential information it obtains in administering the Retirement Homes Act, 2010, unless a specific exception in the Act applies.

A copy of the RHRA Privacy and Access Code is available at www.rhra.ca. If you have questions relating to the collection and disclosure of information, please contact: RHRA's Chief Privacy Officer, 55 York Street, Suite 700, Toronto, ON M5J 1R7 / Telephone 1-855-ASK-RHRA (1-855-275-7472).

REQUIRED SUPPORTING DOCUMENTS

Additional documents to be submitted with a New Operation Licence Application Form are listed below. If any of the required documents are not currently available, the Applicant can still submit the application and provide the anticipated date(s) of submission in the space provided.

Click 'Yes' for documents that will be submitted at the same time as this application. For any 'No' response, provide the status or the anticipated date of submission.

The RHRA may request additional documentation/information as part of the application process.

1. A copy of the home's approved Fire Safety Plan

Yes No

2. Documentation confirming that sprinklers are installed and operational i.e. Contractor's Material Test Certificate

Yes No

3. A copy of a Food Handling Certificate for at least one person involved in food preparation, if the home provides meals to the residents

Yes No

4. Municipal Licence (if required by municipality)

Yes No

5. Pre-opening Public Health Inspection Report

Yes No

6. The Home's full Information Package as required under s. 54 of the Retirement Homes Act ("the Act")¹

Yes No

7. The Home's Procedure for Complaints as required under s.73 of the Act¹

Yes No

8. The Home's Emergency Plan as required under s. 60 (4) 1 of the Act¹

Yes No

REQUIRED SUPPORTING DOCUMENTS – CONT.

9. The Home’s Policy to Promote Zero Tolerance of Abuse and Neglect as required under s. 67(4) of the Act¹

Yes No

10. Letter and/or CV/Resume outlining previous experience of Applicant

Yes No

11. Letter outlining previous sector experience of Management Company (if any)

Yes No

12. Occupancy Permit

Yes No

13. Zoning Confirmation: documentation confirming that the home is zoned in an area that permits the use of a retirement home

Yes No

14. Evidence of Extra Expense Insurance (EEI), including broker name, policy number, date received and policy expiration date

Yes No

15. Required Personal History Report(s) (Individual and/or Corporate)

Yes No

¹ If the applicant home intends on using policies that were previously submitted with an RHRA licensing application and deemed sufficient by the RHRA, the applicant does not need to submit the policies with any subsequent applications. If you are unsure whether you need to submit your policies, please contact the RHRA.

APPLICATION SUBMISSION AND FEES

The standard licence application processing time is six to eight weeks. Expedited application fees can be paid in addition to the licence application fee if an applicant requires priority consideration for applications to be processed within two or four weeks ahead of the standard licence application processing time. If an expedited service is requested, an expedited application fee must be submitted concurrently with the licence application fee.

Current licence application fees are set out in the RHRA's [Fee Schedule](#).

- Do not send cash by mail. Make a cheque or money order payable to **Retirement Homes Regulatory Authority**. Do not post-date cheques or money orders.
- All fees are non-refundable. The RHRA will not begin to process an application before receiving all application fees. A \$50 processing fee for NSF (non-sufficient funds) cheques will apply.
- The Applicant's name must be clearly legible on the cheque or money order. If the name is not pre-printed on the cheque or money order, write it on the front of the cheque.

How would you like to submit the application?

Standard (Application processed in approximately six weeks)

Expedited (Application may be processed in two or four weeks - Extra fees apply)

To view RHRA's Fee Schedule, click [here](#).

Is fee payment being submitted with this application?

Yes

No

CONSENT, DECLARATION, AND APPLICANT SIGNATURE

If the Applicant is a sole proprietor, he/she must sign below. If the Applicant is a corporation, an authorized officer of the Applicant must sign below. If the Applicant is a partnership, a partner with the authority to bind the partnership must sign below.

I have read and understand the above notice. I hereby consent on behalf of the Applicant to the direct or indirect collection, use and/or disclosure of information by the RHRA, in accordance with the Retirement Homes Act, 2010 and as the above notice describes, for the purposes of both licensure issuance and ongoing determinations related to licensure eligibility. I further agree that the RHRA may use this consent as the basis for its requests for information from third parties with information relevant to the eligibility for a licence.

By clicking this box, I declare that the information provided and any supporting documents/materials are, to the best of my knowledge, true and complete.

Full Name:

Signature:

Position:

Date:

To create an email with this completed form attached, **first SAVE the form** and then click SUBMIT FORM.