

Notification of change to Registration

Please complete in BLOCK CAPITALS and in black ink.

This form should be completed by: -

- the registered provider or a person with the authority to represent the registered provider

Documents that must be enclosed with this form -

- Statement of Purpose to incorporate the proposed change
- Assessment of the service recipient (only if the change is result of an emergency)
- Declaration/s—Directors or Trustees of a Body Corporate

Service Provider

Name of care service	<input type="text"/>
Address of care service	<input type="text"/>
	<input type="text"/>
	Postcode
Telephone number	<input type="text"/>
Email address	<input type="text"/>

Name of Registered Provider	<input type="text"/>
Address (if different from service address)	<input type="text"/>
	<input type="text"/>
	Postcode
Telephone number	<input type="text"/>
Email address	<input type="text"/>

Change of purpose

Notification of change (please tick):

- The age range of needs of service recipients that the care service intends to meet
- The range of needs of service recipients that the care service intends to meet
- The premises of the Care Service are significantly altered or extended, or additional premises are acquired
- There is any change in the partnership if the requested provider is a partnership if the registered provider is a body corporate
- The name or address of the body corporate is changed
- There is any change of director, manager, secretary or other similar officer of the body
- If the requested provider is an individual, a trustee in bankruptcy is appointed
- A receiver, liquidator or provisional liquidator is appointed if the registered provider is a body corporate or Partnership

Please continue overleaf



Notice must be given -

- (a) no later than 4 weeks before the proposed change takes effect; or
- (b) within such shorter period (if any) before that date as may be agreed with DHSC; or
- (c) the change is a result of an emergency.

If (b) applies, notice must be given no later than the beginning of the period agreed.

If (c) applies, notice must be given -

- (i) no later than 48 hours after the change takes effect; or
- (ii) if that is impracticable, as soon as possible thereafter.

Date proposed change to take effect

Details of the proposed change:

Details of how the care service intends to meet any proposed change

Declaration

I declare that the information given in this application is, to the best of my/our knowledge and belief, complete and correct.

Signed

Print Name

Position

Date