



**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT OF INSURANCE, SECURITIES AND BANKING**

**810 FIRST STREET, NE, SUITE 701  
Washington, D.C. 20002**

**Application for  
Continuing Care Retirement Community License  
(Step #3 - Preliminary Certificate)**

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**To the Commissioner of Insurance, Securities and Banking:**

In accordance with D.C. Official Code, Title 31, Chapter \_\_, Section\_\_(2005 Supp.),

.....  
Name of Applicant

hereby makes application to the Commissioner of Insurance, Securities and Banking for a Preliminary Certificate for the facility (to be) known as:

.....  
Name of Facility

And located at:

.....  
Address

.....  
City, State and Zip Code

**It is understood that the licensing process in the District of Columbia involves a series of steps, and only upon the completion of all the steps, will a permanent license be issued. It is further understood that the application submitted herewith is for a Preliminary Certificate, which, upon issuance, gives an applicant the authority to purchase or construct a continuing care retirement community or to renovate or develop structures not already licensed as a continuing care retirement community.**

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## PART I – GENERAL INTERROGATORIES

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### 1. Applicant Information:

Legal Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Federal Tax Identification Number: \_\_\_\_\_ Tax - Status: For-Profit  Not-For Profit

Type of Legal Entity: \_\_\_\_\_ Fiscal Year-End (MM/DD): \_\_\_\_\_

Name of Chief Executive Officer or Equivalent: \_\_\_\_\_

### 2. Person to whom all correspondence and inquiries pertaining to this application are to be directed:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### 3. Facility Information:

Name of Facility: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Toll-Free Number: \_\_\_\_\_

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## PART II - EXHIBITS

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**All exhibits listed below must be attached. If the exhibit(s) are not applicable or available, attach an explanation in place of the required exhibit(s) stating the reason(s) why they are not available or applicable.**

Attach the following exhibits:

- Exhibit I - An explanation of any significant differences between actual costs and projected costs contained in the Start-Up Certificate Application.
- Exhibit II - An updated Disclosure Statement (2 copies).
- Exhibit III - Attach a copy of the applicant's current unaudited interim financial statements. The statements shall be prepared on the same basis as the annual audited financial statements. *(This is a separate copy of the unaudited interim financial statements. Another copy may also be required to be included in the disclosure statement referred to in Exhibit II).*
- Exhibit IV - Attach a signed affidavit from a duly authorized officer, principal, general partner, or trustee of the applicant, certifying that the applicant has signed binding agreements for at least 50 percent of the new units, and has reserved those units with a deposit equal to at least 10 percent of the entrance fee or by a non-refundable deposit equal to the periodic fee for at least two months if the facility has no entrance fee.
- Exhibit V - Attach a copy of any material contract entered into or to be entered into by the applicant, for example; a management agreement, lease, development agreement, etc. that has not yet been submitted to the Department.
- Exhibit VI - If bonds are to be or have been issued in connection with the project, submit a copy of the official statement used in connection with the bond issue.
- Exhibit VII - If there has been any material change to the information contained within the Application for a Start-Up Certificate, which has not yet been filed with the Commissioner, attach a description and an explanation of the material change(s).

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## PART III - SWORN STATEMENT

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Under the penalties of perjury, I affirm that I have reviewed this application and accompanying information, and to the best of my knowledge and belief it is true, correct and complete. I on behalf of

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(Name of Applicant(s))

hereby accept in good faith the terms and obligations of the Insurance Laws of the District of Columbia, presently existing, or enacted in the future, as a part of the consideration for a Preliminary Certificate, and that said Applicant has neither directly nor indirectly violated any of the provisions of the said Insurance Laws and of all acts amendatory or supplementary thereto. It is also understood that said Certificate may be revoked as provided for in said laws.

It is further agreed that the Applicant will keep the Government of the District of Columbia Department of Insurance, Securities and Banking informed of any material changes regarding the applicant, the proposed continuing care retirement community, or to any of the information contained within this application.

I as a duly authorized officer, principal, general partner, or trustee, am authorized to make and sign this statement on behalf of the Applicant.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name (type or print): \_\_\_\_\_

Title: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(SEAL)

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_

**\*\*\* General Instructions \*\*\***

**Application for Continuing Care Retirement Community License  
(Step #3 - Preliminary Certificate)**

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I. Governing Law and Rules:

Continuing care providers in the District of Columbia are regulated pursuant to D.C. Official Code, Title 31, Chapter \_\_\_, Section \_\_\_ (2005 Supp.).

II. General:

- A. Please complete the application in its entirety. Each question must be answered or contain a “N/A”, “none” or “not applicable” where appropriate. An application containing unanswered questions will be considered incomplete, and will be returned to the applicant.
- B. If the space provided on the application is insufficient for a full and complete response to any question, and additional space is necessary, a separate sheet, cross-referenced to the specific item or question asked may be attached to the application.
- C. The completed application, with exhibits, is to be placed in a three ring binder, with each exhibit clearly labeled.

III. Processing and Review:

- A. The completed application is to be submitted to:

*Government of the District of Columbia  
Department of Insurance, Securities and Banking  
810 First Street, NE, Suite 701  
Washington, D.C. 20002*

- B. Questions or inquiries are to be directed to:

*Government of the District of Columbia  
Department of Insurance, Securities and Banking  
810 First Street, NE, Suite 701  
Washington, D.C. 20002  
(202) 727-8000*

- C. Within 10 business days following the receipt of an application in proper form, the Department shall issue a “Notice of Filing” to the applicant.

- D. Within 90 days of the “Notice of Filing”, the Department shall either approve the application and consider the application complete and having met the requirements in the Continuing Care Retirement Communities Act, or notify the applicant that its application is incomplete or inadequate.
- i. An application shall be considered having met the requirements of the Continuing Care Retirement Communities Act if:
    1. The application is complete;
    2. The signed affidavit from a duly authorized officer, principal, general partner, or trustee of the applicant, indicates that the applicant has signed binding agreements for at least 50 percent of the new units, and has reserved those units with a deposit equal to at least 10 percent of the entrance fee or by a non-refundable deposit equal to the periodic fee for at least two months if the facility has no entrance fee;
    3. The unaudited financial statements demonstrate the financial soundness of the applicant; and
    4. The applicant is not in violation of any applicable provisions of the Continuing Care Retirement Communities Act.
  - ii. If the application is determined by the Department to not meet the requirements of the Continuing Care Retirement Act, the Department shall identify the deficiencies in the application, and shall give the applicant 30 days within which to correct the deficiencies. If the deficiencies are not corrected within the time allowed, the Department may enter an order rejecting the application. The order shall include the findings of fact upon which the order is based, and will not become effective until 20 days after the end of the 30-day period. During the 20-day period, the applicant may petition for reconsideration and will be entitled to a hearing.

IV. Acquisitions and Mergers:

**In accordance with Section 8201 of the Continuing Care Retirement Communities Regulations, Start-Up Certificates, Preliminary Certificates, and Permanent Licenses are non-transferable. In the event of a proposed acquisition, merger, or change in control, the provider is to contact the Government of the District of Columbia Department of Insurance, Securities and Banking for further instructions.**

V. Required Report Filings:

- A. After the issuance of a Preliminary Certificate, a provider must continue to submit to the Department the following within 150 days following the end of each fiscal year:
  - 1. A revised disclosure statement setting forth current information required by Section 105 of the Continuing Care Retirement Communities Act.
    - a. Where a provider owns or operates more than one facility, a consolidated financial statement is acceptable for the entire corporate entity in order to meet the requirements of Section 105(a)(10) of the Continuing Care Retirement Communities Act, provided a separate statement of operations and statement of changes in cash flow is submitted for each facility operated in the District of Columbia.
    - b. If a provider owns or operates more than one facility in the District of Columbia and files separate audited financial statements for each facility, a consolidated financial statement must also be submitted for the entire corporate entity in order to meet the requirements of Section 105(a)(10) of the Continuing Care Retirement Communities Act.
- B. Unless otherwise specified by the Department, each Preliminary Certificate holder must submit periodic sales, development and financial reports, not less than quarterly, in a form prescribed by the Department.
- C. Failure to file any required report, in an acceptable form and by the applicable due date, could result in an administrative fine or such other action(s) as deemed appropriate by the Department.