**Intermediate Care Facilities Initial Application Checklist**

Letter of Intent

ICF/DD initial license application ($600 + $5 for each bedroom)

Payment Transmittal Form

☐ ICF fees submitted to the Dallas lock box; fees are non-refundable

Architectural Plan Review approval letter from the Office of the State Fire Marshal (OSFM)

OSFM on-site inspection report with approval for occupancy

Office of Public Health (OPH) inspection report with approval for occupancy

Floor Plan with room dimensions: A minimum of 60 sq. feet per client for double occupancy and 80 sq. feet for single occupancy

Statewide Criminal & National Sex Offender background check for all owners and administrators conducted by the Louisiana State Police (LSP) or by an authorized LSP agency

Disclosure of Ownership and control information form

Zoning approval from local governmental authorities

Any other documentation or information required by the department for licensure

Email above documents to [HSS-ICF-Licensing@la.gov](mailto:HSS-ICF-Licensing@la.gov)

\*\*\*\*\*\*\*\***Attention**\*\*\*\*\*\*\*\*\*\*\*\*

There is currently a bed “hold” on certified beds at this time.