

Assisted Living Licensure Application Addendum: Additional Direct or Indirect Owner Information

This is an addendum to the assisted living licensing application form. Use this document if additional direct or indirect owners need to be identified when submitting an assisted living licensure application, regardless of licensed resident capacity.

Submitting Attachments

Applicants must upload attachments to the MDH application portal with their application.

No assisted living services may be provided until MDH issues a license.

Keep a copy of application and attachment materials. They will not be returned to applicants.

Questions?

EMAIL: health.assistedliving@state.mn.us

Additional Direct and Indirect Ownership Information

[Minnesota Statutes § 144G.12, subd. 1\(2\)](https://www.revisor.mn.gov/statutes/cite/144G.12) (<https://www.revisor.mn.gov/statutes/cite/144G.12>)

Pursuant to [Minnesota Statutes § 144G.16, subd.3\(c\)](https://revisor.mn.gov/statutes/cite/144G.16) (<https://revisor.mn.gov/statutes/cite/144G.16>) **The owners and managerial officials of a provisional licensee whose license is denied are ineligible to apply for an assisted living facility license for 1-year following the facility's closure date.**

Provide the information below for all direct and indirect owners of the assisted living facility. (If unknown, see [CMS 855A](https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/cms855a.pdf) (<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/cms855a.pdf>).)

State law requires that applicants for assisted living licensure disclose the legal names, email, mailing addresses and telephone numbers of all owners, managerial officials, and controlling individuals regardless of the nature of the entity applying for licensure. MDH collects personal information, including date of birth (DOB), to verify identity and evaluate the applicant's eligibility for licensure. Information submitted with this application is private while the application is under review. If a provisional license is issued, the information submitted with the application becomes public pursuant to [Minnesota Statutes §13.41](https://revisor.mn.gov/statutes/cite/13.41) (<https://revisor.mn.gov/statutes/cite/13.41>) and [Minnesota Statutes §144.051](https://revisor.mn.gov/statutes/cite/144.051) (<https://revisor.mn.gov/statutes/cite/144.051>).

For non-profit entities: The non-profit corporation should be listed as 100% direct owner, and the President and Treasurer of a non-profit board should be listed as direct owners with 0% ownership interest. If they have

different titles (like Chair) then list the equivalent of the President and Treasurer roles. These individuals will need to have complete eligible background studies for the license to be granted. [Minnesota Statutes § 144G.08 subd.48 \(https://revisor.mn.gov/statutes/cite/144G.08\)](https://revisor.mn.gov/statutes/cite/144G.08)

A separate addendum is required for each additional direct or indirect owner.

Direct ownership interest means an individual or legal entity with the possession of at least five percent equity in capital, stock, or profits of the licensee, or who is a member of a limited liability company of the licensee.

Indirect ownership interest means an individual or legal entity with a direct ownership interest in an entity that has a direct or indirect ownership interest or at least five percent in an entity that is a licensee.

Direct contact means providing face-to-face care, training, supervision, counseling, consultation, or medication assistance to residents of a facility.

Legal name (or entity name) _____

Known names (if applicable) _____

DOB (if applicable) _____

Permanent address _____

City _____ State _____ ZIP _____

Telephone _____

Email address _____

Owner/Member percentage of ownership _____

Type of ownership

☐ Direct

☐ Indirect - List what entity is represented by individual or legal entity:

Will this individual provide direct (care) contact?

☐ Yes

☐ No

Has any individual listed above been convicted of or had any of the disqualifying situations listed in [Minnesota Statutes § 144G.12 subd. 1\(13\)\(14\)](https://www.revisor.mn.gov/statutes/cite/144G.12) (<https://www.revisor.mn.gov/statutes/cite/144G.12>) following information for individual found guilty of the actions listed in [Minnesota Statutes § 144G.12 subd. 1\(13\)\(14\)](https://www.revisor.mn.gov/statutes/cite/144G.12) (<https://www.revisor.mn.gov/statutes/cite/144G.12>)

- Legal name of direct or indirect owner.
- Written explanation including the reason for action taken, dates, and the jurisdiction in possession of your record.
- A copy of the disciplinary action.

For more information contact

Minnesota Department of Health
Health Regulation Division
PO Box 64900
St. Paul, MN 55164-0900
651-539-3049 or 844-926-1061
health.assistedliving@state.mn.us
www.health.state.mn.us

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To obtain this information in a different format, call: 651-201-4101.