

Assisted Living Licensure Application Addendum: New Construction Information

This is an addendum to the assisted living licensing application form. Use this document if new construction is identified when submitting the Assisted Living Licensure application.

Submitting Attachments

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

No assisted living services shall 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

New Construction Information

All new license applications with **five or fewer residents** must meet:

- Minn. Stat. sect. 144G.45, subd. 1-3, 6
 (https://www.revisor.mn.gov/statutes/cite/144G.45), and
- Laws 2020, 7th Spec. Sess., chpt. 1, art. 6, sect. 17
 (https://www.revisor.mn.gov/laws/2020/7/Session+Law/Chapter/1/);

and as applicable:

- Minn. Stat. sect. 144G.80 (https://www.revisor.mn.gov/statutes/cite/144G.80),
- Minn. Stat. sect. 144G.81 (https://www.revisor.mn.gov/statutes/cite/144G.81), and
- <u>Laws 2020, 7th Spec. Sess., chpt. 1, art. 6, sect. 22</u>
 (https://www.revisor.mn.gov/laws/2020/7/Session+Law/Chapter/1/).

All new license applications with six or more residents must meet:

- Minn. Stat. sect. 144G, subd. 1-6 (https://www.revisor.mn.gov/statutes/cite/144G.45), and
- Laws 2020, 7th Spec. Sess., chpt. 1, art. 6, sect. 18 to 19
 (https://www.revisor.mn.gov/laws/2020/7/Session+Law/Chapter/1/);

and as applicable:

- Minn. Stat. sect. 144G.80 (https://www.revisor.mn.gov/statutes/cite/144G.80),
- Minn. Stat. sect. 144G.81 (https://www.revisor.mn.gov/statutes/cite/144G.81), and
- <u>Laws 2020, 7th Spec. Sess., chpt. 1, art. 6, sect. 22</u>
 (https://www.revisor.mn.gov/laws/2020/7/Session+Law/Chapter/1/).

ASSISTED LIVING LICENSURE APPLICATION ADDENDUM: NEW CONSTRUCTION INFORMATION

Did you apply for your building permit before August 1, 2021? ☐ Yes Attach the complete permit application as an attachment. \square No Provide the requested information below: 1. Project name: 2. Project narrative: 3. Identify which building(s) that is part of the construction project: 4. Architecture/Engineering firm name:______ 5. Firm contact name: _____ 6. Firm contact mailing address: 7. Firm contact email address: ______ 8. Firm contact phone number: ______ 9. Was there a preliminary plan review with MDH? □Yes □No If yes, please indicate the appropriate MDH engineer or architect: 10. Indicate project type: ☐ Renovation ☐ Modification ☐ Reconstruction ☐ Change of use or change of occupancy ☐ Addition 11. Number of floors involved in project:_____ 12. Project size in square feet: 13. Total square feet of existing building and project (if applicable): ______

ASSISTED LIVING LICENSURE APPLICATION ADDENDUM: NEW CONSTRUCTION INFORMATION

L4.	Indicate type of construction per National Fire Protection Association 220, Standard on
	Types of Building Construction (https://www.nfpa.org/):
	□ I(442)
	□ I(332)
	□ II (222)
	□ II (111)
	□ II (000)
	□ III (211)
	□ III (200)
	□ IV (2HH)
	□ V (111)
	□ V (000)

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

3/24/2021

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