



**RENEWAL APPLICATION FOR A GROUP HOME
AND/OR CORRECTIONAL GROUP HOME**

1. Group Home/Correctional Group Home Owner/Operator (Service Provider)

- a) Name of Organization _____
- b) Contact Person: _____
- c) Address: _____ Postal Code: _____
- d) Telephone Number: _____
- e) Fax Number: _____
- f) E-mail: _____

2. Group Home Location Information:

- a) Name: _____
- b) Contact Person: _____
- c) Address: _____ Postal Code: _____
- d) Telephone Number: _____
- e) Fax Number: _____
- f) Email : _____

3. Name of Program: _____

Please indicate the following;

Group Home _____ Correctional Group Home _____

(Refer to definitions of Group Home as stated in Bylaw 44-2005 and/Correctional Group Home as stated in By-Law 31-2001)

- a) Type of Program: _____
- b) Total Number of Occupants: _____
- c) Approximate Age of Occupants: _____

(please see reverse)

4. Approving Ministry and/or Government Agency

a) Name of Ministry/Gov. Agency: _____

b) Contact Person: _____

c) Address: _____ Postal Code: _____

d) Telephone Number: _____

e) Fax Number: _____

Signature of Applicant: _____

Date: _____

5. Please check that the following documents are enclosed:

- Written notification from the appropriate Ministry/Government Agency that the Group Home and/or Correctional Group Home continues to be licensed and/or funded.**

- Application Renewal Fee of \$51.00 (Payable to the City of Burlington).**

Personal Information on this form is collected under the authority of the Municipal Act, and is used to register Group Homes/Correctional Group Homes in the City of Burlington pursuant to By-law 31-2001, as amended. Direct inquiries to:

Kevin Arjoon
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