NOTICE OF FORM CHANGE NO. 11-013				DATE
				2/09/2011
County Welfare Dir Supply Clerk / Forr Community Care L District Attorney Private and Public Other	FROM: Forr	ns Managemei	nt Unit	
Listed below is information regarding a form change. Only applicable information is shown.				
This notice updates your California Department of Social Services (CDSS) County Forms Catalog (PUB 69).				
FORM NUMBER, REVISION DATE AND TITLE LIC 200 (2/11) Application For A Community Care Facility Or Residential Care Facility For The Elderly License				
ORDER UNIT	M 5 □ 0 -1-1	ESTIMATED PRICE		INITIAL SUPPLY SENT
MASTER ONLY	Free Sold	DEDI AGES		☐ Yes ☐ No
☐ New ☐ Revised	DATE OF FORM 2/11	REPLACES 7/08		☐ Obsolete
REQUIRED FORM- No Change Permitted REQUIRED FORM- Substitute Permitted With Prior DSS Approval Recommended Form				
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		☐ OTHER:		
Department of Social Services Warehouse P.O. Box 980788		☐ INTERNET:		
West Sacramento, CA 95798-0788		☐ INTRANET:		
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS				
DISPOSITION OF OLD SUPPLY Use until exhausted		☐ Destroy		
USE NEW FORM When supply available in DSS Warehouse		oxtimes Use new form effe	ective <u>imme</u>	diately
USE FORM IN ACCORDANCE WITH				
☐ All County Letter No.				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FORM CHANGE				
http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC200.pdf				

Camera-ready copies are currently available on the CDSS Internet. Go to http://www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm.
Form information on forms not listed in the catalog, you may contact FMU at fmudss@dss.ca.gov.

Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.