

**PUBLIC HEALTH LICENSING SERVICES**  
**Residential Facilities Licensing**  
**150 N. 18th Avenue**  
**Phoenix, AZ 85007**

**APPLICATION AND LICENSE FEE REMITTANCE FORM**

PLEASE RETURN THIS FORM WITH PAYMENT TO ABOVE ADDRESS

**FACILITY ID #:** (Office use ONLY)

**LICENSE #:** (Renewals ONLY) \_\_\_\_\_

**FACILITY NAME:**

**STREET ADDRESS:**

**CITY:**

**STATE:**

**ZIP:**

**ADULT DAY HEALTH CARE FACILITY, ASSISTED LIVING HOME, OR ASSISTED LIVING CENTER**

FEES			AMOUNT DUE
<b>Application Fee</b> (due when application is submitted)			\$50
<b>Licensed Capacity</b> (due after initial inspection)			
Licensed Capacity:	License Fee:	# of Beds x \$70 each:	Total License Fee + Number of Beds Fee:
No licensed capacity	\$280	N/A	\$280
1 to 59 beds	\$280	_____ x \$70 = _____	\$ _____
60 to 99 beds	\$560	_____ x \$70 = _____	\$ _____
100 to 149 beds	\$840	_____ x \$70 = _____	\$ _____
150 or more beds	\$1400	_____ x \$70 = _____	\$ _____
<b>TOTAL AMOUNT DUE</b>			\$ _____

**BEHAVIORAL HEALTH RESIDENTIAL FACILITY,  
ADULT BEHAVIORAL HEALTH THERAPEUTIC HOME,  
ADULT BEHAVIORAL HEALTH RESPITE HOME, OR  
CHILDREN'S BEHAVIORAL HEALTH RESPITE HOME**

FEES			AMOUNT DUE
<b>Application Fee</b> (due when application is submitted)			\$50
<b>Licensed Capacity</b> (due after initial inspection)			
Licensed Capacity:	License Fee:	# of Beds x \$94 each:	Total License Fee + Number of Beds Fee:
No licensed capacity	\$375	N/A	\$375
1 to 59 beds	\$375	_____ x \$94 = _____	\$ _____
60 to 99 beds	\$750	_____ x \$94 = _____	\$ _____
100 to 149 beds	\$1125	_____ x \$94 = _____	\$ _____
150 or more beds	\$1875	_____ x \$94 = _____	\$ _____
<b>TOTAL AMOUNT DUE</b>			\$ _____

**Payment should be cashiers' check, money order or business check made payable to: AZ DEPT OF HEALTH SERVICES**  
**Cash and personal checks are not accepted.**

**ALL FEES ARE NON-REFUNDABLE** pursuant to A.R.S. 36-405(B)(6), 36-882(f) and 36-897.01(c), except as provided in A.R.S. 41-1077. **NOTE:** Fees do not apply to a health care institution operated by a State agency pursuant to federal law such as the Veterans' Home, Arizona State Hospital or adult foster care settings. Authority: A.R.S. 36-405