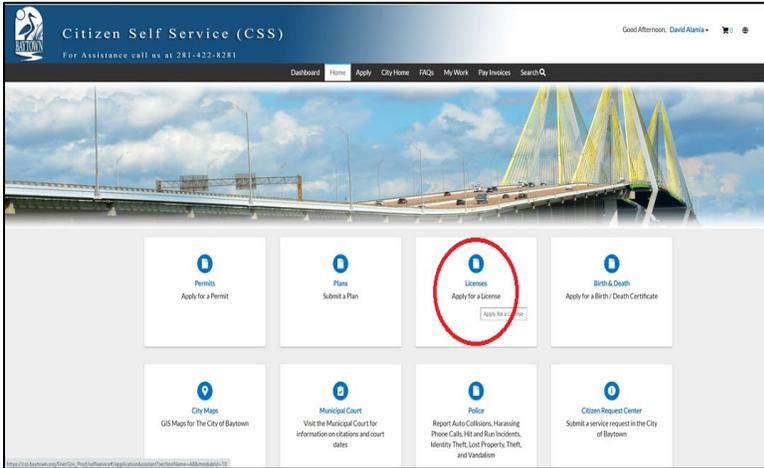
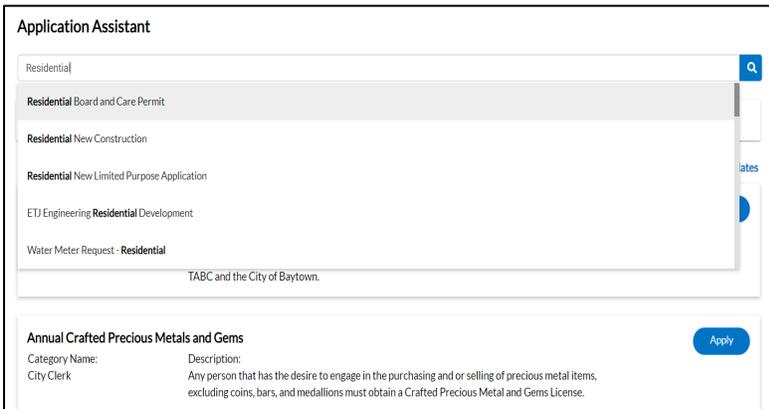


Long Term Care Residential Facility License New Application Guide

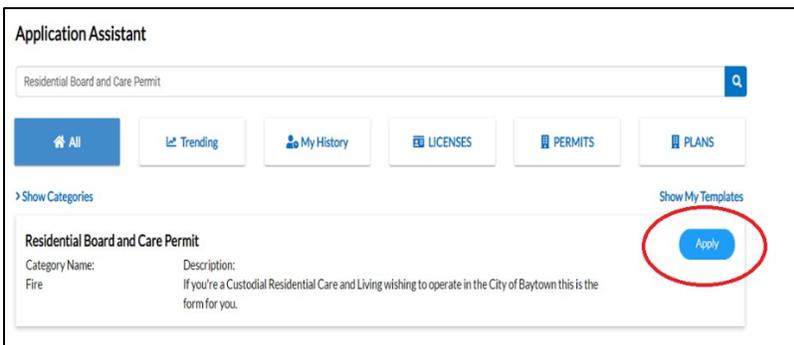
1. Login to Citizen Self Service (CSS) Portal
2. Click on Licenses



3. Search for and Select "Long Term Residential Care"



4. Click the Apply button.



Long Term Care Residential Facility License New Application Guide

5. Select or Create the Business for this application.

Apply for License - Residential Board and Care Permit

Select or create the business for this application

EOC TEST



Limited Liability Company
Status: Applied
205 WYE BAYTOWN TX 77...

Select

Select Company Type

Create New Business During Application

+

6. Provide Location of Facility by search address on map and Press blue add button.

Add Address As Location

SEARCH

205 E Wye

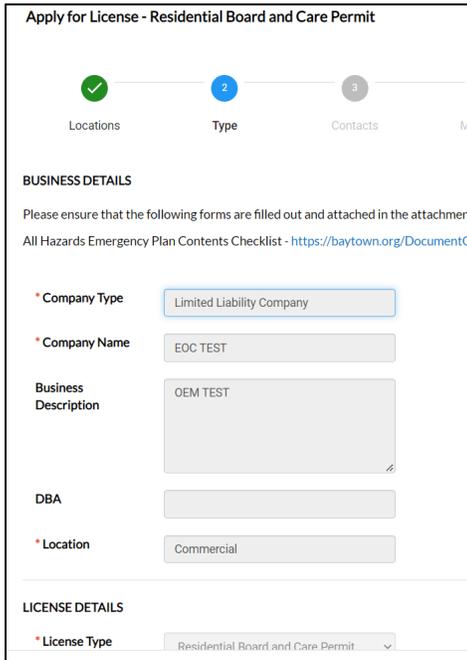
Address

205 E WYE DR



Long Term Care Residential Facility License New Application Guide

7. Provide business details



Apply for License - Residential Board and Care Permit

Locations Type Contacts

BUSINESS DETAILS

Please ensure that the following forms are filled out and attached in the attachment section:
All Hazards Emergency Plan Contents Checklist - <https://baytown.org/DocumentCenter/View/10000>

* Company Type: Limited Liability Company

* Company Name: EOC TEST

Business Description: OEM TEST

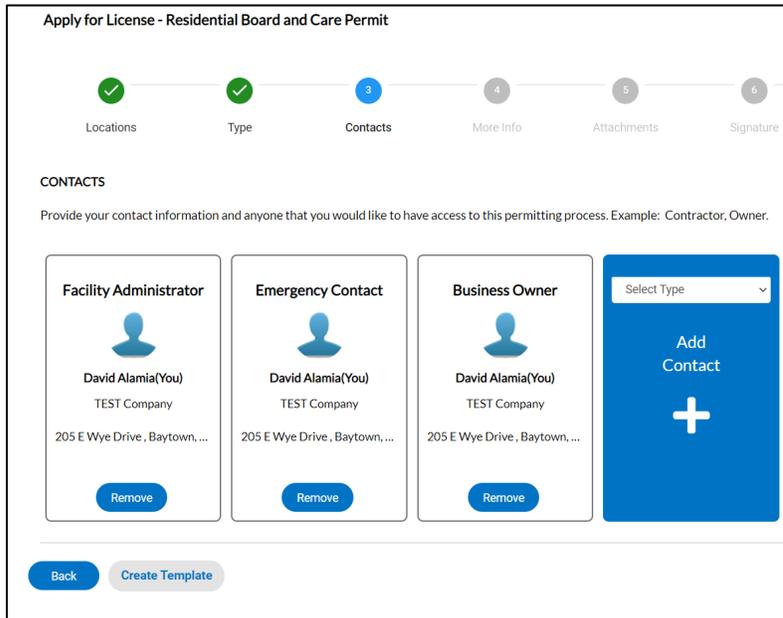
DBA:

* Location: Commercial

LICENSE DETAILS

* License Type: Residential Board and Care Permit

8. Add Contacts for the following: Facility Administrator, Emergency Contact, and Business Owner.



Apply for License - Residential Board and Care Permit

Locations Type Contacts More Info Attachments Signature

CONTACTS

Provide your contact information and anyone that you would like to have access to this permitting process. Example: Contractor, Owner.

Facility Administrator	Emergency Contact	Business Owner	Add Contact
 David Alamia(You) TEST Company 205 E Wye Drive, Baytown, ...	 David Alamia(You) TEST Company 205 E Wye Drive, Baytown, ...	 David Alamia(You) TEST Company 205 E Wye Drive, Baytown, ...	Select Type Add Contact +
Remove	Remove	Remove	

Back Create Template

Long Term Care Residential Facility License New Application Guide

9. Provide Company Information – Facility Administrator Information

Company Info

*Facility Administrator Name

*Drivers License Number

*Drivers License State

*Number of Occupants

*Description of Services Provided

[Back](#) [Create Template](#)

10. Add Attachments, which includes the following:

- a. Emergency Plan
- b. Emergency Plan Checklist (download form with blue URL online)
- c. Copy of Facility State License
- d. Transportation Agreement
- e. Hosting Agreement

Attachments

Please ensure that the following forms are filled out and attached in the attachment step.

All Hazards Emergency Plan Contents Checklist - <https://baytown.org/DocumentCenter/View/4780/2021-All-Hazards-Emergency-Plan-Contents-Checklist>

If you are a Long Term Care Facility, please include the Transportation agreement and Hosting Facility agreement under attachments.

Emergency Plan

Add Attachment

+

Supported: pdf, jpg, png, jpeg, gif, tiff, doc, docx, xls, xlsx, txt, dwg, zip, csv, rtf, dxf, dw...

REQUIRED

Emergency Plan Checklist

Add Attachment

+

Supported: pdf, jpg, png, jpeg, gif, tiff, doc, docx, xls, xlsx, txt, dwg, zip, csv, rtf, dxf, dw...

REQUIRED

Facility State License

Add Attachment

+

Supported: pdf, jpg, png, jpeg, gif, tiff, doc, docx, xls, xlsx, txt, dwg, zip, csv, rtf, dxf, dw...

REQUIRED

Select Type

Add Attachment

+

Supported: pdf, jpg, png, jpeg, gif, tiff, doc, docx, xls, xlsx, txt, dwg, zip, csv, rtf, dxf, dw...

[Back](#) [Create Template](#) [Save Draft](#)

Long Term Care Residential Facility License New Application Guide

Long Term Care Residential Facility Emergency Plan Checklist



Instructions: Complete this form by providing the page numbers for this content in your Facility's Emergency Plan. This checklist meets the minimum requirements outlined in the City of Baytown's Code of Ordinances Upload this completed form as an attachment to the Citizen Self Service (CSS) Portal.

Page

____ Current signature page and date

____ Table of contents

Facility Name: _____

____ Identification and assessment of risks, threats, and hazards

Plan must address the following core functions:

- ____ Direction and Control
- ____ Warning and Communication
- ____ Sheltering arrangements
- ____ Evacuation
- ____ Transportation
- ____ Health and Medical Needs
- ____ Resource Management

____ Annual and periodic training and exercises

____ Facility floor plan and sketch map of area

____ Resident Roster

____ Staff Roster (includes 24hr contact)

____ Outside Agency Telephone Roster

Additional Attachments:

For Long Term Care Facilities (Nursing Homes, Assisted Living Facilities, and Intermediate Care Facilities - IDD) the following documents must be uploaded as attachments to the Citizen Self Service (CSS) Portal.

____ Hosting Facility Agreement (must be current – within 5 years)

____ Transport Contracts or Agreements (must be current – within 5 years)

<https://baytown.org/DocumentCenter/View/4780/2021-All-Hazards-Emergency-Plan-Contents-Checklist>

Long Term Care Residential Facility License New Application Guide

11. Provide Signature

SIGNATURE

By submitting this application on behalf of the above named firm, to the City of Baytown, I hereby affirm and declare that all information submitted on this form is true and correct. It is understood that false statements of information on this application may be considered as sufficient cause for revocation or denial of permit. I shall also notify the City of additions(s) or substitutions(s) of vehicle(s), change in provider name or ownership, change in medical director, permanent or long term change in level of service, and any other responsibility as defined by ordinance during the permit period.

The Facility provides assurances the attached Facility Emergency Operations Plan is in compliance with State and Federal polices, standards, and regulations and applicable accreditation standards.

* Please type your name as consent to electronically sign this application.

Enable Type Signature

David Alamia
December, 06 2022

12. Review and Submit Application

***REQUIRED**

Locations

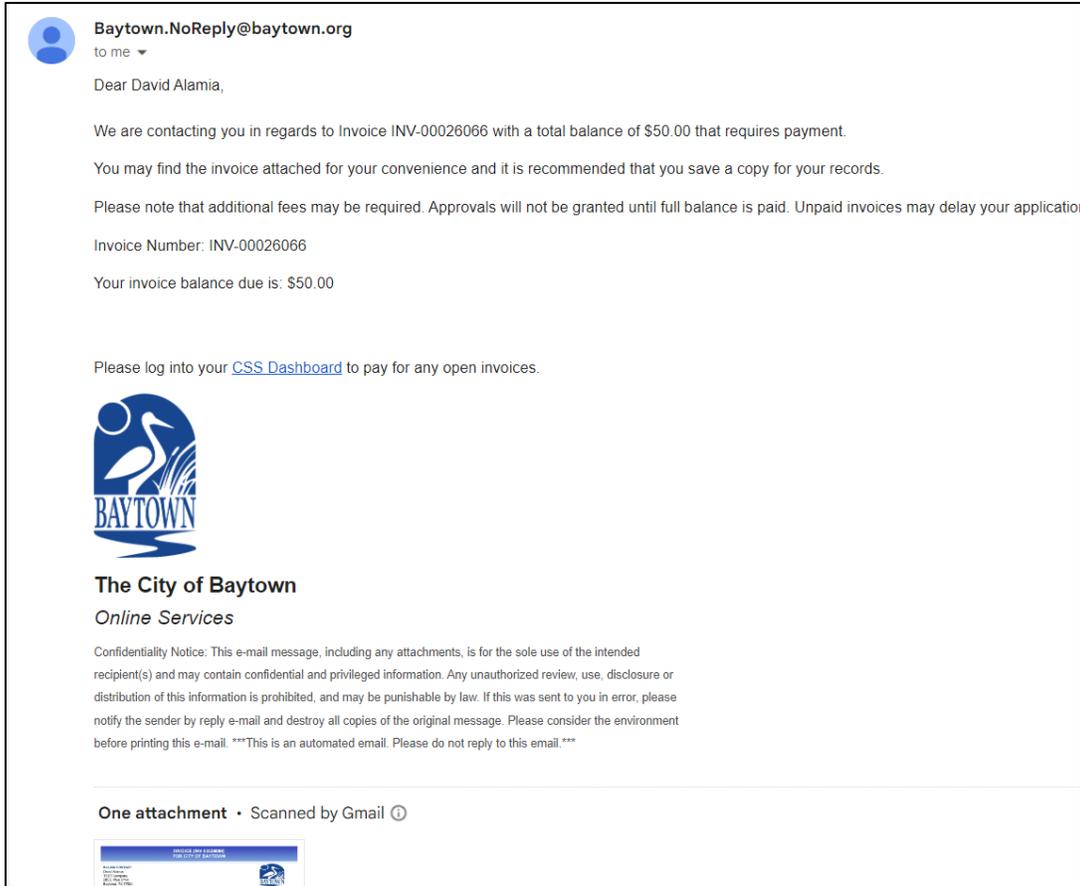
Location	205 E WYE DR BAYTOWN, TX 77521 - HARRIS COUNTY
Parcel Number	0450130010015

Basic Info

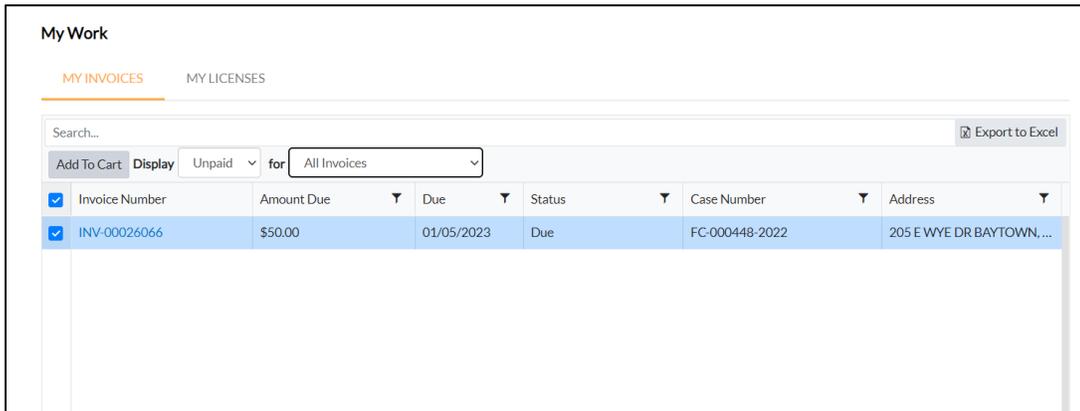
Company Name	EOC TEST
Company Type	Limited Liability Company
Business Description	OEM TEST
DBA	
Location	Commercial
License Type	Residential Board and Care Permit
Description	
Applied Date	12/06/2022

Long Term Care Residential Facility License New Application Guide

13. Upon submission, City Staff will send an invoice for payment. Once an Invoice is emailed, you can log back in and pay the invoice online.



14. Go to My Work and Select Invoice



Long Term Care Residential Facility License New Application Guide

15. Add to Cart and click Check Out.

[← Back](#)

Shopping Cart

Total \$50.00

[Check Out](#)

Invoice: INV-00026066 Description: FC-000448-2022
 Due Date: 01/05/2023

Case Number	Project	Case Address	Amount Due
FC-000448-2022		205 E WYE DR BAYTOWN TX 77521	\$50.00

\$50.00

[Remove](#)

[Top | Main Menu](#)

Total \$50.00

[Check Out](#)

16. Pay Online by Credit Card or E-Check.



EMPOWERED BY TYLER TECHNOLOGIES

Baytown, TX
 Order Number: 10401
 Tuesday, December 6, 2022

Invoice #	Item Description	Quantity	Unit Price	Total Price
INV-00026066	FC-000448-2022	1	\$50.00	\$50.00
			Item Total:	\$50.00
			Order Total:	\$50.00

Payment Details *all fields are required

Pay with Credit Card

Pay with E-Check

[Cancel](#)