

IV. COUNTIES SERVED (FREESTANDING OR MOBILE TECHNOLOGY APPLICANTS: Check all counties that your facility wants to serve if mobile services are provided)

Statewide (do not check individual counties when checking Statewide)

- | | | | | | |
|-------------------------------------|---------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Adair | <input type="checkbox"/> Allen | <input type="checkbox"/> Anderson | <input type="checkbox"/> Ballard | <input type="checkbox"/> Barren | <input type="checkbox"/> Bath |
| <input type="checkbox"/> Bell | <input type="checkbox"/> Boone | <input type="checkbox"/> Bourbon | <input type="checkbox"/> Boyd | <input type="checkbox"/> Boyle | <input type="checkbox"/> Bracken |
| <input type="checkbox"/> Breathitt | <input type="checkbox"/> Breckenridge | <input type="checkbox"/> Bullitt | <input type="checkbox"/> Butler | <input type="checkbox"/> Caldwell | <input type="checkbox"/> Calloway |
| <input type="checkbox"/> Campbell | <input type="checkbox"/> Carlisle | <input type="checkbox"/> Carroll | <input type="checkbox"/> Carter | <input type="checkbox"/> Casey | <input type="checkbox"/> Christian |
| <input type="checkbox"/> Clark | <input type="checkbox"/> Clay | <input type="checkbox"/> Clinton | <input type="checkbox"/> Crittenden | <input type="checkbox"/> Cumberland | <input type="checkbox"/> Daviess |
| <input type="checkbox"/> Edmondson | <input type="checkbox"/> Elliott | <input type="checkbox"/> Estill | <input type="checkbox"/> Fayette | <input type="checkbox"/> Fleming | <input type="checkbox"/> Floyd |
| <input type="checkbox"/> Franklin | <input type="checkbox"/> Fulton | <input type="checkbox"/> Gallatin | <input type="checkbox"/> Garrard | <input type="checkbox"/> Grant | <input type="checkbox"/> Graves |
| <input type="checkbox"/> Grayson | <input type="checkbox"/> Green | <input type="checkbox"/> Greenup | <input type="checkbox"/> Hancock | <input type="checkbox"/> Hardin | <input type="checkbox"/> Harlan |
| <input type="checkbox"/> Harrison | <input type="checkbox"/> Hart | <input type="checkbox"/> Henderson | <input type="checkbox"/> Henry | <input type="checkbox"/> Hickman | <input type="checkbox"/> Hopkins |
| <input type="checkbox"/> Jackson | <input type="checkbox"/> Jefferson | <input type="checkbox"/> Jessamine | <input type="checkbox"/> Johnson | <input type="checkbox"/> Kenton | <input type="checkbox"/> Knott |
| <input type="checkbox"/> Knox | <input type="checkbox"/> Larue | <input type="checkbox"/> Laurel | <input type="checkbox"/> Lawrence | <input type="checkbox"/> Lee | <input type="checkbox"/> Leslie |
| <input type="checkbox"/> Letcher | <input type="checkbox"/> Lewis | <input type="checkbox"/> Lincoln | <input type="checkbox"/> Livingston | <input type="checkbox"/> Logan | <input type="checkbox"/> Lyon |
| <input type="checkbox"/> Madison | <input type="checkbox"/> Magoffin | <input type="checkbox"/> Marion | <input type="checkbox"/> Marshall | <input type="checkbox"/> Martin | <input type="checkbox"/> Mason |
| <input type="checkbox"/> McCracken | <input type="checkbox"/> McCreary | <input type="checkbox"/> McLean | <input type="checkbox"/> Meade | <input type="checkbox"/> Menifee | <input type="checkbox"/> Mercer |
| <input type="checkbox"/> Metcalfe | <input type="checkbox"/> Monroe | <input type="checkbox"/> Montgomery | <input type="checkbox"/> Morgan | <input type="checkbox"/> Muhlenberg | <input type="checkbox"/> Nelson |
| <input type="checkbox"/> Nicholas | <input type="checkbox"/> Ohio | <input type="checkbox"/> Oldham | <input type="checkbox"/> Owen | <input type="checkbox"/> Owsley | <input type="checkbox"/> Pendleton |
| <input type="checkbox"/> Perry | <input type="checkbox"/> Pike | <input type="checkbox"/> Powell | <input type="checkbox"/> Pulaski | <input type="checkbox"/> Robertson | <input type="checkbox"/> Rockcastle |
| <input type="checkbox"/> Rowan | <input type="checkbox"/> Russell | <input type="checkbox"/> Scott | <input type="checkbox"/> Shelby | <input type="checkbox"/> Simpson | <input type="checkbox"/> Spencer |
| <input type="checkbox"/> Taylor | <input type="checkbox"/> Todd | <input type="checkbox"/> Trigg | <input type="checkbox"/> Trimble | <input type="checkbox"/> Union | <input type="checkbox"/> Warren |
| <input type="checkbox"/> Washington | <input type="checkbox"/> Wayne | <input type="checkbox"/> Webster | <input type="checkbox"/> Whitley | <input type="checkbox"/> Wolfe | <input type="checkbox"/> Woodford |

V. CONTROL (check one in each column)

- | | | |
|---------|-----------|-------------|
| State | Profit | Individual |
| County | Nonprofit | Partnership |
| City | | Corporation |
| Private | | |

VI. OWNERSHIP Name and address of direct owner:

NOTE: Provide the following supporting documentation as an attachment to this application:

- The of name, mailing address, email address and phone number each person or legal entity having an ownership interest in the facility;
- If owned by a corporation, the name, mailing address, email address and phone number of each officer or director of the corporation;
- If owned by a partnership, the name, mailing address, email address and phone number of each partner.

VII. FIRE MARSHAL (APPLICABLE ONLY TO FIXED-SITE FACILITIES for PROVISIONAL and CHANGE of LOCATION)

Please submit documentation of the Fire Marshal's approval for the location(s) where services will be provided. Final approval from the Fire Marshal shall be considered current if approved within 12 months from the date the Office of Inspector General receives the licensure application. If your facility has not been inspected and approved within the previous 12 months, please contact the Fire Marshal's Office to request an inspection.

