NOTICE OF TERMINATION
RETURN OF LICENSE

Please complete this form upon terminating your affiliation with a named facility.
Promptly return the completed form to the Board with your original license naming that facility.

NAC 654.181 provides that each person licensed as a nursing facility administrator, an administrator of a residential facility for groups or a health services executive shall notify the Board in writing any time he/she changes his contact information including home address, phone number, cell phone number and email address or changes his/her affiliation with a facility within 15 days after such an event. A Licensee will be subject to a fine of $500.00 for a first offense if the above rule is not adhered to.

Also, NAC 654.250.7 requires a nursing facility administrator, an administrator of a residential facility for groups or a health services executive to surrender and return a license to the Board not later than 15 calendar days after terminating his or her affiliation with a named facility for any reason. Licensees will be subject to a fine of $500.00 for the first violation and at least $1,000.00 for a second or subsequent violation, but will not exceed $10,000 for each violation.

I, _____,

License No. _____, hereby notify the Board that effective _____

_____   The Facility has closed

_____   I am no longer the named administrator

Facility: _____

Address: _____

_____

My original Administrator's License naming the above facility is enclosed.

Sincerely,

_____   Date: _____
Signature

_____
Print Name