

**Texas Department of Insurance Financial, Company Licensing & Registration,** Mail Code 305-2C 333 Guadalupe • P. O. Box 149104, Austin, Texas 78714-9104 512-322-3507 telephone • 512-322-3550 fax • www.tdi.state.tx.us

CHAPTER 33

RULE §33.203

SUBCHAPTER C

**CONTINUING CARE RETIREMENT FACILITIES** APPLICATION BY CONTINUING CARE PROVIDER FOR CERTIFICATE OF AUTHORITY

## Filing Requirements for Application for Certificate of Authority

- (A) The applicant shall submit the applicable filing fee, as referenced in §33.6 of this title (relating to Fees for Filing Application for Certificate of Authority).
- (B) The applicant shall provide the department with an original and two copies of the entire application in three-ring binders with all pages clearly legible and numbered.
- (C) Each application binder must contain a table of contents and must be divided with tabs identified to correspond to the items listed in §33.204 of this title (relating to Contents of Application). If any item listed in that section is inapplicable to the applicant, the applicant shall include a page behind the tab for that item with a statement explaining the inapplicability.
- (D) The applicant must submit all narrative material typed, double-spaced, and clearly legible.
- (E) The original of the application becomes the charter file; therefore, all signatures on the required forms in the original application must be original signatures.
- (F) If the application is revised or supplemented during the review process prior to hearing, the applicant must submit an original and two copies of a transmittal letter describing the revision or supplement plus an original and two copies of the specified revision or supplement.

(G) If a page is to be revised, two copies of the complete new page must be submitted with the changed item or information clearly marked on the two copies. The original page which is placed in the charter copy of the application must not have any marks on it.

INCOMPLETE APPLICATIONS IMPEDE TIMELY REVIEW BY THE DEPARTMENT, THEREFORE, IT IS EXTREMELY IMPORTANT THAT APPLICATIONS ARE COMPLETE. SUBMIT A COMPLETE FILING TO THE TEXAS DEPARTMENT OF INSURANCE, COMPANY LICENSING & REGISTRATION DIVISION, MC 305-2C, P. O. BOX 149104, AUSTIN, TX 78714-9104. FOR QUESTIONS OR MORE INFORMATION, CALL (512) 322-4370.

TITLE 28	INSURANCE
PART 1	TEXAS DEPARTMENT OF INSURANCE
CHAPTER 33	CONTINUING CARE RETIREMENT FACILITIES
SUBCHAPTER C	APPLICATION BY CONTINUING CARE PROVIDER FOR CERTIFICATE OF AUTHORITY
RULE §33.204	

## **Contents of Application for Certificate of Authority**

- (A) The applicant shall submit an original and two copies of the items listed in paragraphs (1)-(9), as applicable.
  - (1) CCRC Form #1 (Application for Certificate of Authority To Do Business in the State of Texas under the Act, §246.022);
  - (2) CCRC Form #3 (Officers and Directors page);
  - (3) CCRC Form #4 (Biographical Data Form) or CCRC Form #4a (Biographical Data Form for Not-for-Profit CCRC Board Members);
  - (4) basic organizational documents and all amendments thereto, with an original certification or seal from the state of domicile. These documents shall include, but not be limited to, the articles of incorporation, the bylaws, and the resolution by the board of directors certifying corporate approval of the project;
  - (5) certified copy of assumed name certificate;
  - (6) letter from Internal Revenue Service recognizing tax-exempt status under Internal Revenue Code with a certification by an officer that it is a true and correct copy of the original;
  - (7) chart or listing clearly presenting the identities and interrelationship among affiliates showing the percentage of each class of voting securities of each affiliate which is owned or controlled, directly or indirectly, by another affiliate, or indicating the basis of control if other than by ownership or control of voting securities;
  - (8) agreements establishing the entrance fee and reserve fund accounts or a verified statement explaining why an escrow is not required. The agreements shall be accompanied by the items described in subparagraphs (a)-(c) of this paragraph:
    - (a) name and address of escrow agent;
    - (b) certification of the number of persons and the percentage of the number of living units in the facility under reservation agreements with funds on deposit in the entrance fee escrow accounts; and
    - (c) statement or set of instructions that the provider will send to the escrow agent

to request a release of funds to the provider from the entrance fee and reservation fund escrow accounts;

- (9) complete disclosure statement on CCRC Form #6 (Form For Disclosure Statement);
- (10) service contracts or agreements with affiliates;
- (11) management contract if the facility will be managed on a day-to-day basis by a person other than individuals directly employed by the provider;
- (12) independent feasibility study;
- (13) actuarial review as defined in §33.2 of this title (relating to Definitions);
- (14) all priority agreements, reservation agreements, or any types of contracts or agreements which the provider is using in soliciting continuing care contracts, contracting, or collection of funds, if not included in the disclosure statement;
- (15) financial statements dated no more than 90 days prior to the application submission date, if not included in the disclosure statement;
- (16) documentation evidencing a commitment to the provider for any permanent mortgage loan or other long-term financing arrangement;
- (17) list or description of liens which attach to any part of the facility before, during, or after construction;
- (18) legal description of real property on which the facility is or will be located; and
- (19) any additional information relating to items required under paragraphs (1)-(18) of this subsection, as the department may request.

(B) The 180-day period during which the commissioner is required to issue an order approving or disapproving an application for a certificate of authority shall commence on the date, as determined by the department, that all required material is submitted to the department.

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THESE GUIDELINES ARE GENERAL IN NATURE AND DO NOT SUPERCEDE STATUTE OR REGULATION. THEY ARE NOT INTENDED TO BE ALL INCLUSIVE AND ADDITIONAL DOCUMENTATION MAY BE REQUESTED.