

# Licensure Renewal



To renew your agency's license, you must complete a [Personal Service Agency Renewal Application](#) SF53591 and submit a \$250.00 licensure fee to the department. Refer to instructions below on how to complete the application.

A courtesy letter along with the renewal application is sent to the agency 90 days prior to the expiration date of the license. The agency may access and complete the [renewal application online](#).

1. Complete the renewal application in its entirety including the following:
  - a. Section I—Agency Name and Address
    - i. Include complete agency's name
    - ii. Include complete address (street, city, county, zip code)
    - iii. Include telephone and fax numbers
    - iv. Include license number
    - v. Include e-mail address, specific to agency and web address, if applicable.
  - b. Section II—Management
    - i. Include manager and alternate managers. If there are changes submit applicable criminal history checks.
  - c. Section III—Branches
    - i. **Include existing branches only with no changes.**
    - ii. Do not include branch changes.
    - iii. Do not add a branch.
  - d. Section IV—Ownership Information
    - i. Section IV—A. Legal Entity
      - If completing the application online complete the legal entity name and EIN number.
      - If completing the hard copy application complete the EIN number.
    - ii. Section IV—B. Officers
      - If there are no changes, check the "NO" box.
      - If there are changes, check the "YES" box. Complete changes in this section of the application. Include applicable criminal history checks.
    - iii. Section IV—C. Directors/Officers
      - If there are no changes, check the "NO" box.
      - If there are changes, check the "YES" box. Complete changes in this section of the application. Include applicable criminal history checks.
  - e. Section V—Certification of Application
    - i. The appropriate staff must sign and date the application.
      - The application must be signed and dated by the president/CEO/owner and by the manager. The names must be on record with the department.
2. If there are changes in staffing/officers submit applicable current criminal history checks.
  - a. Submit a current (within the past 3 months an expanded or national criminal history check

- b. An expanded criminal history report shall contain the results of the search (i.e. no record found, clear; or if a record, the results of the record) and include the requirements of IC 20-26-2-1.5. The agency is responsible to ensure the expanded criminal history reports meets the State statute IC 20- 26-2-1.5 and include all the requirements of A-G and lifetime or unlimited search on the report.
3. If there are changes (address, phone-fax numbers, email address) that occurred at your agency make sure all changes are made on the renewal application. Include all applicable information with the application.
4. The application must be submitted prior to the expiration date of the license. The application must be approved and licensure fee received prior to issuance of license.
5. Submit the \$250.00 licensure renewal fee with your [renewal application](#) (SF 53591). Make check or money order payable to the Indiana Department of Health. Submit application and \$250.00 renewal fee to:

**Indiana Department of Health  
2 N Meridian Street, Cashier, 2nd Floor  
Indianapolis, Indiana 46204**

6. Once the documents are submitted and approved, the Department will update our database to reflect the changes and send a confirmation licensure letter and license to the agency.
7. The renewal application will be processed with the legal owners on record with the Department.
8. If the agency chooses not to renew their license, please send a letter to the department closing the agency. Include the agency's name, complete address and license number. The department will close the agency and send a confirmation letter to the agency.

