

**Application for Renewal of Registration Childrens Residential Centre
Pursuant to Part VIII, Section 61(9) Childcare Act 1991**

Alternative Care Inspection &
Monitoring Service
Child & Family Agency

SECTION 1

PLEASE COMPLETE ALL SECTIONS – INCOMPLETE FORMS WILL NOT BE ACCEPTED

REGISTERED PROPRIETOR 1

Name:	
Home Address:	
Eircode:	
Email:	
Telephone:	
Photo ID (supplied with this application)	

REGISTERED PROPRIETOR 2

Name:	
Home Address:	
Eircode:	
Email:	
Telephone:	
Photo ID (supplied with this application)	

REGISTERED PROPRIETOR 3

Name:	
Home Address:	
Eircode:	
Email:	
Telephone:	
Photo ID (supplied with this application)	

REGISTERED PROPRIETOR 4

Name:	
Home Address:	
Eircode:	
Email:	
Telephone:	
Photo ID (supplied with this application)	

PROPOSED PERSON IN CHARGE		AGENCY / ORGANISATION DETAILS	
Name:		Name:	
Home Address:		Address:	
Eircode:		Eircode:	
Email:		Company Type:	
Telephone:		Email:	
		Telephone:	
		CRO No:	
Photo ID (supplied with this application)		Charity No. (if any):	

SERVICE LEVEL AGREEMENT & FUNDING FOR CARE

CATEGORY	STATUS	DURATION	TUSLA CONTACT	NOTES

CENTRE INSURANCE

COMPANY	INSURANCE TYPE	LIMIT PER INCIDENT	EFFECTIVE DATE	EXPIRY DATE

STATUTORY DECLARATION

* Must be signed by proposed registered proprietor

I declare that I am the registered proprietor of this centre and am entered on the register of children's residential centres as such.

I declare that all of the information provided within this application including the mandatory submissions is correct.

I declare that I have made no material alterations to the centres registration particulars during the last period of registration or that any changes made, were made through the prescribed change in circumstances process and authorised by the Child & Family Agency.

I acknowledge that it is an offence and will render my application void to submit any information that is misleading or materially false.

I declare that I will co-operate with and assist in the assessment of the information provided in this declaration if required,

Signed: _____ Date: _____

Mandatory submission documents

- Up to date confirmation of insurance cover for the centre.
- Up to date Child Safeguarding Statement dated as reviewed within last 24 months.
- Garda Vetting Declaration within 36 months of the date of application submission for registered proprietor and person in charge.
- Staff Proforma form