

INDIVIDUAL WAIVER/EXCEPTION LOG

LICENSING OFFICE					TELEPHONE NUMBER ()		REPORT/MONTH/YEAR		
ITEM NO.	FACILITY NAME LICENSEE NAME	FACILITY NUMBER	DATE OF REQUEST		DATE RECEIVED	APPLICABLE REGULATION SECTION(S)	DISPOSITION		REASON FOR DENIAL CODE
			WAIVER	EXCEPTION			DATE GRANTED	DATE DENIED	
1									
2									
3									
4									
5									
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7									
8									
9									

CODES FOR DENIAL OF WAIVER/EXCEPTION REQUESTS

- 01 The regulatory section(s) cited in the waiver/exception request is a statutory requirement which is not subject to waiver, i.e.
- 02 Waiver/exception may cause health and safety problems.
- 03 Waiver/exception request does not enhance the supervision and care of clients.
- 04 Waiver/exception request is incompatible with the plans of the placement agency (*or agencies*) involved with your facility.
- 05 Insufficient information received by central office on which to base a decision.
- 06 Waiver/exception request does not indicate specifically in what way this waiver will be beneficial to the clients residing at the facility.
- 07 A community care license is required to operate your facility (*only applicable when request is made for waiver of community care license*).
- 08 Other (*Specify*)