**Residential Care Homes (Persons with Disabilities) Ordinance**

**Application for a Licence**

|  |
| --- |
| Note: Please put a “✓” in the appropriate boxes |

**Part I Details of Application**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Application for a licence for setting up a new Residential Care Home for the Persons with Disabilities (RCHD) (please fill in Part II) | | | | | | | | | | | | | | | | | | | | | | | |
| Tentative date of commencement of the proposed RCHD: | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | / |  | | / |  | | | | (dd/mm/yyyy) | | | | | | | | | | | | |
|  | | | | |  | | | |  | | | |  | |  | |  | |  | | | | |
| Application for a licence by a licensed RCHD | | | | | | | | | | | | | | | | | | | | | | | |
| Date of commencement of the existing RCHD: | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | / |  | | / |  | | | | (dd/mm/yyyy) | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | | | |  | |  | |  |  | |  |
| Reasons for applying for a new licence (may choose more than one item): | | | | | | | | | | | | | | | | | | | | | | | |
| **Change of the name of the RCHD** | | | | | | | | | | | | | | | | | | | | | | | |
| Current name of the RCHD: | | | | | | | | | | | |  | | | | | | | | | |  | |
| Proposed new name of the RCHD: | | | | | | | | | | | |  | | | | | | | | | |  | |
| **Change of the address of the RCHD** | | | | | | | | | | | | | | | | | | | | | | | |
| Current address of the RCHD: | | | | | | | | | | | |  | | | | | | | | | |  | |
| Proposed new address of the RCHD: | | | | | | | | | | | |  | | | | | | | | | |  | |
| **Change of the operator/operating company** | | | | | | | | | | | | | | | | | | | | | | | |
| Name of the current operator/operating company: | | | | | | | | | | | | | | | | | | | | | |  | |
|  | |  | | | | | | | | | | | | | | | | | | | |  | |
| Name of the proposed new operator/operating company: | | | | | | | | | | | | | | | | | | | | | |  | |
|  | |  | | | | | | | | | | | | | | | | | | | |  | |
| **Change of the type of the RCHD** | | | | | | | | | | | | | | | | | | | | | | | |
| Current RCHD type: | | | | | | | | High care level home  Medium care level home  Low care level home | | | | | | | | | | | | | |  | |
| Proposed RCHD type: | | | | | | | | High care level home  Medium care level home  Low care level home | | | | | | | | | | | | | |  | |
| **Change of the maximum capacity of the RCHD** | | | | | | | | | | | | | | | | | | | | | | | |
| Maximum capacity of the existing RCHD: | | | | | | | | | | | | | |  | | | | | | | |  | |
| Maximum capacity of the proposed new RCHD: | | | | | | | | | | | | | |  | | | | | | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | |

**Part II Particulars of the RCHD**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of the RCHD in English | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| Name of the RCHD in Chinese | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| Address of the RCHD in English | | | | | | | |
|  | | | | | | | |
| Address of the RCHD in Chinese | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| Telephone number | | | Fax number | | | | |
| Email address | | | | | | | |
| Operation mode of the RCHD | | | | | | | |
| Subvented home | | | | | | | |
| Self-financing home | | | | | | | |
| Subvented cum self-financing home | | | | | | | |
| Private home | | | | | | | |
| Contract home | | | | | | | |
|  | | | | | | | |
| Type of the RCHD | | | | | | | |
| High care level home | | | | | | | |
| Medium care level home | | | | | | | |
| Low care level home | | | | | | | |
|  | | | | | | | |
| The premises of the RCHD is: | | | | | | | |
| a self-owned property | | | | | | | |
| a rented property (please specify the duration of the tenancy agreement below) | | | | | | | |
| situated on leased government land | | | | | | | |
| a partially self-owned and partially rented property (please specify the duration of the tenancy agreement below) | | | | | | | |
|  | Details of the self-owned portion | |  | | | |  |
|  | Details of the rented portion | |  | | | |  |
| Validity of Tenancy Agreement (1) | | From |  | to |  | |  |
| Validity of Tenancy Agreement (2) | | From |  | to |  | |  |
| Validity of Tenancy Agreement (3) | | From |  | to |  | |  |
|  | |  | | | | | |
| (Please use supplementary sheets if necessary) | | | | | |  | |
|  | |  | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Number of places in the RCHD | | | | | | | | | | | |
|  | | High care level places | | | | |  | |  | |  |
|  | | Medium care level places | | | | |  | |  | |  |
|  | | Low care level places | | | | |  | |  | |  |
|  | | Total | | | | |  | |  | |  |
|  | | | | | | | | | | | |
| Area of floor space the RCHD (Shall be the same as that shown on the layout plan submitted with this application form) | | | | | | | | | | | |
|  |  | | | | m2 | | | | | | |
|  | | | | | | | | | | | |
| Type of applicant/operator for the RCHD | | | | | | | | | | | |
| Sole proprietorship (Please fill in Part III(A)) | | | | | | | | | | | |
| Partnership (Please fill in Part III(A)) | | | | | | | | | | | |
| Body corporate (including a non-governmental organisation (NGO))  (Please fill in Part III(B)) | | | | | | | | | | | |
|  | | |  |  | |  | |  | |  | |

**Part III (A) To be filled in by a Sole Proprietorship or Partnership**

(If partner in the partnership is a body corporate, please fill in Part III(B))

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name(s) of the operator/partner(s) in the partnership  (Shall be the same as the name shown on the Hong Kong Identity Card) | | | | | | | |
| 1. Mr/  Ms | | | | | | | |
|  |  | | | | ( |  | ) |
|  | English (surname first, then other names) | | | |  | Chinese |  |
|  | | | | | | | |
| Hong Kong Identity Card number | | | | | | | |
| Correspondence address | | | | | | | |
| Telephone number | | Email address | | | | | |
|  | | | | | | | |
| 1. Mr/  Ms | | | | | | | |
|  |  | | | | ( |  | ) |
|  | English (surname first, then other names) | | | |  | Chinese |  |
|  | | | | | | | |
| Hong Kong Identity Card number | | | | | | | |
| Correspondence address | | | | | | | |
| Telephone number | | | Email address | | | | |
|  | | | | | | | |
| 1. Mr/  Ms | | | | | | | |
|  |  | | | | ( |  | ) |
|  | English (surname first, then other names) | | | |  | Chinese |  |
|  | | | | | | | |
| Hong Kong Identity Card number | | | | | | | |
| Correspondence address | | | | | | | |
| Telephone number | | | | Email address | | | |
|  | | | | | | | |
| (Please use supplementary sheets if necessary) | | | | | | |  |

**Part III (B)**  **To be filled in by a Body Corporate (Including an NGO/a Partner in the Partnership who is a Body Corporate)**

|  |  |
| --- | --- |
| Name of the company/NGO in English | |
|  | |
|  | |
| Name of the company/NGO in Chinese | |
|  | |
|  | |
| Business registration number (if applicable) | The trust/ Company’s Certificate of Incorporation number/ The chapter number of the Ordinance of the Laws of Hong Kong under which the statutory body is incorporated (if applicable) |
|  |  |
|  |  |
| Address of the company/NGO in English | |
|  | |
|  | |
| Address of the company/NGO in Chinese | |
|  | |
| Telephone number | Email address |
|  |  |
|  |  |

**Part IV Correspondence of Authorised Representative**

(A body corporate (including an NGO/a partner in the partnership) shall authorise an “authorised representative” in writing. For details, please refer to the Guidance Notes for Application for a Licence)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of the authorised representative  (Shall be the same as the name shown on the Hong Kong Identity Card) | | | | | |
| Mr/ Ms | | | | | |
|  |  | | ( |  | ) |
|  | English (surname first, then other names) | |  | Chinese |  |
|  | | | | | |
|  | | | | | |
| Telephone number | | Email address | | | |
| Position of the authorised representative in the company/ NGO/ RCHD  (if applicable) | | | | | |
|  | | | | | |
|  | | | | | |

**Part V Declaration of the Applicant** **(Including Sole Proprietor, Body Corporate, Partner in the Partnership)**

(For partnership, each partner must fill in a separate Part V)

|  |  |  |  |
| --- | --- | --- | --- |
| I hereby declare that:   1. the sole proprietor/ body corporate/ partner (applicable to partner being an individual or a body corporate) is currently being prosecuted for or has been convicted of an offence involving fraud or dishonesty in any place. | | | |
| No | | | |
| Yes (If you answer “yes”, please provide the relevant prosecution documents/court documents with the following details) | | | |
| being prosecuted currently | | | |
|  | Prosecuting authority |  |  |
|  | Place of prosecuting authority |  |  |
|  | Offence involved |  |  |
|  | Date of hearing |  |  |
| has been convicted | | | |
|  | Court that tried the offence |  |  |
|  | Place of the court |  |  |
|  | Offence committed |  |  |
|  | Penalty imposed |  |  |
|  | Date of conviction |  |  |
|  | | | |
| 1. the sole proprietor/ body corporate/ partner (applicable to partner being an individual or a body corporate) is currently being prosecuted for or has been convicted of an indictable offence[[1]](#footnote-1) in Hong Kong. | | | |
| No | | | |
| Yes (If you answer “yes”, please provide the relevant prosecution documents/court documents with the following details) | | | |
| being prosecuted currently | | | |
|  | Prosecuting authority |  |  |
|  | Offence involved |  |  |
|  | Date of hearing |  |  |
| has been convicted | | | |
|  | Court that tried the offence |  |  |
|  | Offence committed |  |  |
|  | Penalty imposed |  |  |
|  | Date of conviction |  |  |
|  | | | |
| 1. the sole proprietor/ partner (applicable to partner being an individual) is currently being prosecuted for an offence punishable with imprisonment or has been sentenced to imprisonment, whether or not the sentence is suspended, in a place outside Hong Kong. | | | |
| No | | | |
| Yes (If you answer “yes”, please provide the relevant prosecution documents/court documents with the following details) | | | |
| being prosecuted currently | | | |
|  | Prosecuting authority |  |  |
|  | Place of prosecuting authority |  |  |
|  | Offence involved |  |  |
|  | Date of hearing |  |  |
| has been convicted | | | |
|  | Court that tried the offence |  |  |
|  | Place of the court |  |  |
|  | Offence committed |  |  |
|  | Penalty imposed |  |  |
|  | Date of conviction |  |  |
|  | | | |
| 1. the body corporate/ partner (applicable to partner being a body corporate) is currently being prosecuted for or has been convicted of an offence in a place outside Hong Kong. | | | |
| No | | | |
| Yes (If you answer “yes”, please provide the relevant prosecution documents/court documents with the following details) | | | |
| being prosecuted currently | | | |
|  | Prosecuting authority |  |  |
|  | Place of prosecuting authority |  |  |
|  | Offence involved |  |  |
|  | Date of hearing |  |  |
| has been convicted | | | |
|  | Court that tried the offence |  |  |
|  | Place of the court |  |  |
|  | Offence committed |  |  |
|  | Penalty imposed |  |  |
|  | Date of conviction |  |  |
|  | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. the sole proprietor/ body corporate/ partner (applicable to partner being an individual or a body corporate) is currently being prosecuted for or has been convicted of an offence against the Residential Care Homes (Elderly Persons) Ordinance/Residential Care Homes (Elderly Persons) Regulation/Residential Care Homes (Persons with Disabilities) Ordinance/Residential Care Homes (Persons with Disabilities) Regulation. | | | |
| No | | | |
| Yes (If you answer “yes”, please provide the relevant prosecution documents/court documents with the following details) | | | |
| being prosecuted currently | | | |
|  | Prosecuting authority |  |  |
|  | Offence involved |  |  |
|  | Date of hearing |  |  |
| has been convicted | | | |
|  | Court that tried the offence |  |  |
|  | Offence committed |  |  |
|  | Penalty imposed |  |  |
|  | Date of conviction |  |  |
|  | | | |
| 1. the sole proprietor/ body corporate/  partner (applicable to partner being an individual or a body corporate) has been refused the issuance or renewal of a licence/certificate of exemption under the Residential Care Homes (Elderly Persons) Ordinance/Residential Care Homes (Persons with Disabilities) Ordinance. | | | |
| No | | | |
| Yes (If you answer “yes”, please provide the following details) | | | |
|  | Date |  |  |
|  | LORCHE/LORCHD number and RCH name (if applicable) |  |  |
|  | Reason(s) |  |  |
|  | | | |
| 1. the sole proprietor/  partner (applicable to partner being an individual) is an undischarged bankrupt. | | | |
| No | | | |
| Yes (If you answer “Yes”, please provide the following details) | | | |
|  | Date of adjudication |  |  |
|  | Court that made the adjudication |  |  |
|  | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. the sole proprietor/partner (applicable to partner being an individual or a body corporate)/ body corporate has entered into a composition or scheme of arrangement with the creditor(s). | | | |
| No | | | |
| Yes (If you answer “Yes”, please provide the following details) | | | |
|  | Date of approval of the composition or scheme of arrangement with the creditor(s) |  |  |
|  | Repayment proposal |  |  |
|  | | | |
| 1. the sole proprietor/ partner (applicable to partner being an individual or a body corporate)/ body corporate is a director of a body corporate that is in liquidation or the subject of a winding-up order. | | | |
| No | | | |
| Yes (If you answer “Yes”, please provide the following details) | | | |
|  | Name of the company in English |  |  |
|  | Name of the company in Chinese (if applicable) |  |  |
|  | Business Registration number |  |  |
|  | Certificate of Incorporation number (if applicable) |  |  |
|  | Registered address of the company |  |  |
|  | Date of adjudication |  |  |
|  | Court that made the adjudication |  |  |
|  | | | |
| 1. the body corporate/ partner (applicable to partner being a body corporate) is in liquidation or the subject of a winding-up order. | | | |
| No | | | |
| Yes (If you answer “Yes”, please provide the following details) | | | |
|  | Date of adjudication |  |  |
|  | Court that made the adjudication |  |  |
|  | | | |
|  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. I have read, understood and agreed to the contents of this declaration, the Personal Information Collection Statement, and the Guidance Notes for Application for a Licence; | | | | |
|  | | | | |
| 1. the information I have provided on this application form is true and correct to the best of my knowledge and belief; | | | | |
|  | | | | |
| 1. I consent to the Social Welfare Department (SWD) making necessary enquiries on matters regarding my application for an RCHD licence and for verifying the information given above (e.g. requesting details of my conviction records (if any) from the Commissioner of Police; details of my bankruptcy records (if any) from the Official Receiver); | | | | |
|  | | | | |
| 1. I (applicable to the sole proprietor and the partner (being an individual)) agree to sign the specified authorisation in the witness of the staff of Licensing Office of Residential Care Homes for Persons with Disabilities (LORCHD) so as to authorise the Commissioner of Police to release my criminal record(s) to the SWD for the vetting of this application for an RCHD licence; | | | | |
|  | | | | |
| 1. I authorise all government departments and other organisations or agencies (including but not limited to Town Planning Board/ Planning Department/ Lands Department/ Hong Kong Police Force/ Hong Kong Fire Services Department/ Buildings Department/ Electrical and Mechanical Services Department/ Official Receiver's Office/ Government bureaux and departments/ public utilities companies, etc.) to disclose any relevant records and information pertaining to my application for an RCHD licence on a need-to-know basis; and | | | | |
|  | | | | |
| 1. the operation, keeping, management or other control of the RCHD above is under my continuous supervision. | | | | |
|  | | | | |
|  | Signature of the  Applicant/  Authorised Representative/  Partner (applicable to partner being an individual): | |  |  |
|  |  |  |  |  |
| Date: |  | Name (Block letters): |  |  |
|  | | | | |
| Company/Organisation Chop (if applicable): | | |  |  |
|  | | |  | |

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| **WARNING**   1. Under section 22(6)(a) of the Residential Care Homes (Persons with Disabilities) Ordinance, any person who in or in connection with this application makes any statement or furnishes any information, whether such statement be oral or written, which is false in any material particular and which the person knows or reasonably ought to know is false in such particular commits an offence. The provision of such false information may also prejudice this application and the existing licence. 2. Under section 4 of the Residential Care Homes (Persons with Disabilities) Ordinance, any person who operates, keeps, manages or otherwise has control of a residential care home while no licence is in force in respect of the residential care home commits an offence and is liable to a fine of $1,000,000 and to imprisonment for 2 years and to a fine of $10,000 for each day during which the offence continues. 3. Licensing of an RCHD does not prejudice the power of other government departments to take enforcement or regulatory actions, neither release or affect any contract, covenant or deed of mutual covenant in respect of the premises or building. The applicant/authorised representative shall be responsible for ensuring that the premises used for the purpose of RCHD comply with the relevant legislations, statutory plans, land lease conditions, deed of mutual covenant and tenancy conditions. |

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| **Personal Information Collection Statement** |
| **Please read this notice before you provide any personal data[[2]](#footnote-2) to the SWD.**  Purposes of Collection   1. The personal data supplied by you will be used by the SWD to process your application for a residential care home licence and related matters, including (but is not limited to) service supervision and regulation. Provision of personal data to the SWD is voluntary. However, if you fail to provide the requested personal data, the SWD may be unable to process your application.   Classes of Transferees   1. The personal data you provided may be made available to other government departments/organisations/persons or under the circumstances listed below for the purposes mentioned in paragraph 1 above –  (a) Other government departments/organisations/persons if they are involved in –    * 1. the application for residential care home licence;      2. service supervision and regulation of residential care homes, including handling of complaints;    1. Where such disclosure is authorised or required by law; or    2. Where you have given your prescribed consent to such disclosure.     Access to Personal Data   1. You have the right to request access to and correction of your personal data held by the SWD in accordance with the Personal Data (Privacy) Ordinance, Cap 486. A fee is charged for supplying copies of personal data. Requests for access to and correction of personal data collected by the SWD should be addressed to –  |  |  |  | | --- | --- | --- | | Post title | ： | Executive Officer I (Licensing & Regulation)2 | | Office | ： | Development Section, Licensing & Regulation Branch, Social Welfare Department | | Address | ： | 5/F, THE HUB, 23 Yip Kan Street, Wong Chuk Hang, Hong Kong | | Email | ： | eoilr2@swd.gov.hk | |

**Residential Care Homes (Persons with Disabilities) Ordinance**

**Guidance Notes for Application for a Licence**

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|  | An “applicant” includes a sole proprietorship, partnership and body corporate (including an NGO). | | |
|  | A partnership and body corporate (including an NGO) shall authorise a “authorised representative” to sign on this application form, and submit a written authorisation together with this application form. | | |
|  | The applicant/representative of the applicant shall forward the original copy of a completed application form by dispatch or by registered post to the LORCHD of the SWD, or the application form can be completed and submitted electronically via the Online Platform. The address of LORCHD is– | | |
|  |  | | 5/F, THE HUB, 23 Yip Kan Street,  Wong Chuk Hang, Hong Kong |
|  | Any person applying for an RCHD licence shall submit the following documents at the same time – | | |
|  |  | | |
| (a) Applicable to all applications | | | |
|  | layout plans of the RCHD[[3]](#footnote-3)1 (please refer to Annex 3.3 of the Code of Practice for Residential Care Homes (Persons with Disabilities) for the requirements of layout plans) | | |
|  | photocopy of the tenancy agreement of the RCHD premises (applicable to rented premises) | | |
|  | photocopy of the deed of assignment of the RCHD premises (applicable to self-owned premises) | | |
|  | certified copy of the Business Registration Application (applicable to applications of private RCHDs) | | |
|  | photocopy of the Business Registration Certificate (applicable to applications of private RCHDs) | | |
|  | photocopy of the Branch Registration Certificate (applicable to applications of private RCHDs) (if applicable) | | |
|  | staff list of the RCHD | | |
|  | application form for establishing of “specific hours” during the specified period | | |
|  | photocopy of the relevant documents related to fire safety and precautionary measures (please refer to Annex 5.1 of the Code of Practice for Residential Care Homes (Persons with Disabilities)) | | |
|  |  | | |
|  |  | | |
|  | photocopy of the letter issued by the Buildings Department regarding the change in use of a building (applicable to RCHD premises situated at non-domestic premises or non-domestic part of composite buildings) | | |
|  | documentary proof of planning permission issued by the Town Planning Board (if applicable) | | |
|  | waiver issued by the Lands Department (if applicable) | | |
|  | proposal of a responsible person for an RCHD | | |
|  | photocopy of Hong Kong Identity Card and correspondence address of responsible person | | |
|  |  | | |
| Besides the items in (a) above, the following documents shall be submitted – | | | | |
| (b) (i) Applicable to an application of a sole proprietorship | | | | |
|  | | | photocopy of Hong Kong Identity Card of the applicant | |
|  | | | relevant court document related to the criminal record of the applicant (if applicable) | |
|  | | | relevant records issued by Official Receiver to the applicant (if applicable) | |
|  | | | relevant documents of the entered composition or scheme of arrangement with their creditors (if applicable) | |
|  | | |  | |
| (b) (ii) Applicable to an application of a partnership | | | | |
|  | | | photocopies of Hong Kong Identity Card of all partners | |
|  | | | original copy of the written authorisation for the representative of the applicant (if applicable) | |
|  | | | relevant court document related to the criminal record of all partners (if applicable) | |
|  | | | relevant records issued by Official Receiver to all partners (if applicable) | |
|  | | | relevant documents of the entered composition or scheme of arrangement with their creditors (if applicable) | |
| (b) (iii) Applicable to an application of a body corporate (including an NGO) | | | | |
|  | | | original copy of the written authorisation for the representative of the applicant | |
|  | | | photocopy of the Incorporation Form (NNC1) | |
|  | | | photocopy of the Certificate of Incorporation | |
|  | | | Memorandum of Association and/or Articles of Association | |
|  | | | photocopy of the Annual Return (NAR1) (applicable to an existing body corporate) | |
|  | | | photocopy of the Notice of Change of Company Name (NNC2) (if applicable) | |
|  | | | photocopy of the Notice of Change of Company Secretary and Director (Appointment/Cessation) (ND2A) (if applicable) | |
|  | | | relevant court document related to the criminal record of the body corporate (if applicable) | |
|  | | | relevant records issued by Official Receiver to the body corporate (if applicable) | |
|  | | | relevant documents of the entered composition or scheme of arrangement with their creditors (if applicable) | |

1. According to section 14A of the Criminal Procedure Ordinance (Cap. 221), if the legislative provision creating the offence contains the words "upon indictment" or "on indictment"etc., then the offence is an indictable offence. [↑](#footnote-ref-1)
2. Under the Personal Data (Privacy) Ordinance (Cap. 486), personal data means any data –

   (a) relating directly or indirectly to a living individual;

   (b) from which it is practicable for the identity of the individual to be directly or indirectly ascertained; and

   (c) in a form in which access to or processing of the data is practicable. [↑](#footnote-ref-2)
3. 1 If the layout plans of the RCHD involves alteration and addition (A&A) works of which prior approval of plans and consent to the commencement of works from the Building Authority is required, the applicant shall enclose the related documents including approved plan(s) and letter(s) in submitting the licence application. In case the proposed layout plans involves A&A works and there are no related documents enclosing in the application form, the said application and all the submitted documents would be returned to the applicant and no follow-up action would be taken. If the applicant considers making an application again for the licence, the applicant shall resubmit the application form and all the documents as required in Chapter 3 in this Code of Practice. [↑](#footnote-ref-3)