

Ohio Department of Health

MATERNITY LICENSURE

Board of Health

Certificate of Approval

General Information and Instructions

Ohio Administrative Code (OAC) 3701-7-03 states that the Ohio Department of Health is to forward a copy of a completed application to the board of health of the health district in which the maternity unit and newborn care nursery, newborn care nursery, or maternity home is located. The board of health of the health district shall approve the application, unless the maternity unit, newborn care nursery, or maternity home is in noncompliance with any applicable local health regulation; and notify the director of its determination within 30 days of receipt of the application.

You may fax the Certificate of Approval to (614) 564-2426 or mail to the address below.

Ohio Department of Health
DQA/BIOS – Licensure Program
246 N. High Street, 3rd Floor
Columbus, OH 43215

Should you have any questions regarding the actual survey or the requirements, you may e-mail the survey bureau at community@odh.ohio.gov or call (614) 387-0801. Should you have any questions regarding the form, please e-mail us at liccert@odh.ohio.gov or call the BIOS Licensure Program at (614) 466-7713.

MATERNITY LICENSURE

Board of Health Certificate of Approval

Hospital/Home Name	ID # _____MAT
Address	
City	Zip

_____, Board of Health, being in session on _____, adopted and approved the above maternity licensure application.

Moved by: _____

Seconded by: _____

Roll call, each member voted as follows:

Comments: _____

Health Commissioner's Name _____

Signature _____

Date _____

Return to: Ohio Department of Health
DQA/BIOS – Licensure Program
246 N. High Street
Columbus, OH 43215
(614) 564-2426 (Fax)