

Application to vary a Part 4 Certificate of Authority

Adults with Incapacity (Scotland) Act 2000

A. Details of service and manager

Title: Mr Mrs Ms Other:

Surname:

First names:

Service address:

Town:

Postcode:

Telephone:

Email:

Name of care service:

Name of provider:

CS number:

B. Details of renewal of a Certificate of Authority

NB. Please enclose the current Certificate of Authority

Name of service user:

Date of issue:

Date of expiry:

Certificate number:

Date of expiry of certificate of incapacity:

Existing Account Details

Account number	
Sort code	
Name of account	
Address of bank or building society	

Please indicate variation to be made:

Change of authorised person(s) (go to section C)

Change to existing account (go to section D)

New account (go to section E)

C. Change of authorised person(s)

* A change of manager will require a new application to be made.

Name:

Position:

Signature:

Name:

Position:

Signature:

Name:

Position:

Signature:

Authorised persons must be in the employ of the named care service.

D. Change to existing account

Account number	<input type="text"/>
Sort code	<input type="text"/>
Name of account	<input type="text"/>
Address of bank or building society	<input type="text"/>

E. New Account Details

Account number	<input type="text"/>
Sort code	<input type="text"/>
Name of account	<input type="text"/>
Address of bank or building society	<input type="text"/>

Declaration:

I declare that as the manager this authorised establishment, the information given in this form is to the best of m knowledge accurate, correct and complete. I understand that I must comply with the Adults with Incapacity (Scotland) Act 2000 Part 4, taking into account the principles of the Act.

Signature of manager:

Date:

Headquarters

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY
Tel: 01382 207100
Fax: 01382 207289

We have offices across Scotland. To find your nearest office, visit our website or call our Care Inspectorate enquiries line.

Website: www.careinspectorate.com

Email: enquiries@careinspectorate.com

Care Inspectorate Enquiries: 0845 600 9527

This publication is available in other formats and other languages on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànanan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت گزارش پر دیگر شکلوں اور دیگر زبانوں میں دستیاب ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذا المنشور متوافر عند الطلب بتنسيقات وبلغات أخرى.

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

