



Certificate of Need Program
PO Box 47852
Olympia WA, 98504-7852
360-236-2955

Nursing Home Full Facility Closure Bed Banking Notice Certificate of Need Instructions

The Certificate of Need (CN) Program will use the information in your application to determine if your project meets the applicable review criteria. These criteria are included in state law and rules. Revised Code of Washington ([RCW 70.38](#)) and Washington Administrative Code ([WAC 246-310](#)).

General Instructions:

- Number all pages consecutively
- Make the narrative information complete and to the point.
- Cite all data sources.
- Provide copies of articles, studies, etc. cited in the application.
- Under no circumstance should your application contain any patient identifying information.
- **Do not skip any questions in this application. If you believe a question is not applicable to your project, provide rationale as to why it is not applicable.**

Answer the following questions in a manner that makes sense for your project. In some cases, a table may make more sense than a narrative. The department will follow up in screening if there are questions.

Program staff members are available to provide technical assistance (TA) at no cost to you before submitting your application. While TA isn't required, it's highly recommended and can make any required review easier. To request a TA meeting, call 360-236-2955 or email us at CN@doh.wa.gov.

Certificate of Need Contact Information:

Mailing Address:

Department of Health
Certificate of Need Program
P.O. Box 47852
Olympia, Washington 98504-7852

Physical Address:

Department of Health
Certificate of Need Program
111 Israel Road S.E.
Tumwater, Washington 98501

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.