Submission – Form (Director of Regulation)

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| **Submissions on Regulatory Judgments on a stage 2 inspection report to the Director of Regulation** | |
| **Name of Centre** |  |
| **Centre OSV number** |  |
| **Date of Submission** |  |
| **Service Provider** |  |
| **Name of person making the submission** |  |
| **I am making this submission with the full knowledge and consent of the provider** | Yes [ ]  No [ ] |
| **Inspection ID:** |  |
| **Date of Inspection:[[1]](#footnote-1)**  **(one form per inspection only)** | \_\_\_\_/\_\_/\_\_\_ |
| **Date of feedback** | \_\_\_\_/\_\_/\_\_\_ |
| **Date of return of Compliance Plan/Action Plan** | \_\_\_\_/\_\_/\_\_\_ |
| **Date of Receipt (office use only)** |  |

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| **Regulation /Standard/Theme[[2]](#footnote-2) name and Number** | **Judgement you wish to make a submission on [[3]](#footnote-3)** | **Evidence to support your submission** | **Office use only** |
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| List any support documentation included as part of this submission |
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1. One form must be submitted for each inspection. If you wish to make a submission for another inspection, please complete a separate form. [↑](#footnote-ref-1)
2. The regulation/standard/theme number, as listed in the inspection report. [↑](#footnote-ref-2)
3. These are identified in the assessment judgment framework [↑](#footnote-ref-3)