



OKLAHOMA OFFICE OF ATTORNEY GENERAL

APPLICATION FOR ADDITION/CHANGE OF SERVICE OR LOCATION

ALL CERTIFIED PROGRAMS MUST COMPLY WITH THE APPLICABLE STANDARDS
AND CRITERIA SET FORTH IN OKLAHOMA ADMINISTRATIVE CODE (OAC)
TITLE 75, CHAPTER 1, CHAPTER 15, CHAPTER 25, AND/OR CHAPTER 30

AGENCY NAME: _____ FULL NAME OF DIRECTOR: _____

PHONE NUMBER: _____ DIRECTOR'S EMAIL: _____

DATE OF APPLICATION: _____

CHANGE OF LOCATION FOR CURRENT SERVICE

ADD A NEW SERVICE LOCATION

THE FOLLOWING DOCUMENTATION MUST ACCOMPANY THE APPLICATION:

1. A NON-REFUNDABLE FEE VIA CHECK OR MONEY ORDER IN THE AMOUNT OF \$150.00 (PER LOCATION) PAYABLE TO THE OFFICE OF ATTORNEY GENERAL

NEW LOCATIONS:

2. Approved fire inspections from the state or local Fire Marshall for each new location

3. ZONING COMPLIANCE FOR EACH NEW LOCATION

SIGNATURE OF EXECUTIVE DIRECTOR

DATE: _____

SIGNATURE OF BOARD PRESIDENT (IF APPLICABLE)

DATE: _____

CHANGE CURRENT SERVICE LOCATION

PREVIOUS LOCATION ADDRESS	NEW LOCATION ADDRESS
STREET:	STREET:
CITY:	CITY:
ZIP CODE:	ZIP CODE:

PREVIOUS LOCATION ADDRESS	NEW LOCATION ADDRESS
STREET:	STREET:
CITY:	CITY:
ZIP CODE:	ZIP CODE:

ADD SERVICE LOCATION

NEW SERVICE LOCATION ADDRESS	NEW SERVICE LOCATION ADDRESS
STREET:	STREET:
CITY:	CITY:
ZIP CODE:	ZIP CODE:

NEW SERVICE LOCATION ADDRESS	NEW SERVICE LOCATION ADDRESS
STREET:	STREET:
CITY:	CITY:
ZIP CODE:	ZIP CODE:

SUBMIT APPLICATION TO:
VICTIMS SERVICES UNIT
OKLAHOMA OFFICE OF THE ATTORNEY GENERAL
313 NE 21ST STREET
OKLAHOMA CITY, OK 73105