

AGENCY PROVIDER CONTACT DATA COLLECTION SHEET

Prospective Franklin County Provider:

The Franklin County Board of Developmental Disabilities (FCBDD) requires that all DODD Certified providers desiring to serve in Franklin County supply the Office of Provider Relations with the information listed below. This information is necessary for verifying your status and adding your Agency to our database of providers eligible for service authorization.

If already approved, upon submission of this form, *if available*, please forward/include a copy of, the email notice of approval/certification which should have been issued to your agency by The Ohio Department of DD (DODD). If you are still in the process of applying, we will retain this form on file until you submit verification of your Agency Certification.

**** Please print contact information clearly. ****

Agency Name: _____

C.E.O./D.O.O./Representative Name (as listed on PSM): _____

Agency Provider Address: _____

Phone # (s): _____ Fax #: _____

Email: _____

Agency Tax ID/EIN: _____

Provider C.E.O./D.O.O. Signature: _____

Date: _____

*** Please return this form and DODD Certification Notice (if available) to:**

provider.relations@fcbdd.org

FCBDD, Office of Providers Relations,
2879 Johnstown Road, Columbus, OH 43219

or Fax to (614) 342-5004

→ **Questions? Write to above or Call (614) 342-5944**