

Schedule 1: Applicant Corporate Structure and Affiliates

Please provide a complete list and a description in the table below of the following:

- Officers and directors of the Applicant, and
- Any person or entity with a direct or indirect Controlling Interest in the Applicant, as defined in section two (2) of the LTCHA, including those who have a Controlling Interest due to the definition of Associate.

	Name of Officers/Directors or entity with a Controlling Interest in the Applicant	Description of Relationship
1		
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List all of the long-term care homes in Ontario that have been, or are currently, operated by the proposed Licensee, any Affiliate(s) of the proposed Licensee, and any of the persons listed above.

	Name (proposed licensee, Affiliate, other)	Description of Relationship	Name of Long-Term Care Home	Facility ID Number
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