

SCHEDULE

Regulation 5

1. The full name, address, phone and facsimile number (if any) of the place of work of the provider.
2. The full name of the manager.
3. All addresses the care service may have.
4. The type of care service which is registered in terms of section 47(1) of the Act.
5. Details of any condition to which the registration is subject.
6. The date of registration of the care service.
7. Any other information which SCSWIS considers would assist users or prospective users of a care service.