



2231 Conowingo Road Suite A  
Bel Air, MD 21015  
P: 410.803.8726  
F: 410.803.8732

[www.harfordmentalhealth.org](http://www.harfordmentalhealth.org)

### Agreement to Cooperate Required Documents

#### New programs:

- Completed Agreement to Cooperate with signature for all programs requesting licensure
- Preliminary report/approval from accrediting body
- 10.63 Application (pages 2-4)

Once all required documentation is received you will receive a confirmation email and dates to set up a site visit. Once site visit is conducted and approved, agreement to cooperate will be signed by the OMH/CSA Executive Director.

#### Program renewals:

- Completed Agreement to Cooperate with signature for all programs requesting licensure
- Approval from accrediting body
- 10.63 Application (pages 2-4)

\*\*\* Please submit all required documentation or additional questions to Jamie Miller-  
Jmiller@harfordmentalhealth.org