

APPLICATION FOR LICENCE FAMILY CHILD CARE AND IN-HOME MULTI-AGE CHILD CARE

The personal information collected relates directly to and is necessary for program operation per Section 26 of the *Freedom of Information and Protection of Privacy Act* Information that appears on a licence may be disclosed per Section 22(4)(i) of the Act, as it is not considered an unreasonable invasion of personal privacy. If you have any questions about the collection and use of this information contact your local Community Care Facilities Licensing Office.

Licensee Information					
Licensee Name		Licer	see Phone Number	Licensee Email	
Licensee Address				I am at least 19 years old	
Include Street Number, Street Name, City, Province and Postal Code				Yes	No
I have previously applied to be a Licensee of a Community Care Facility/operated a Community Care Facility					
No Yes - Facility name(s)					
I have previously been the manager of a Community Care Facility					
No Yes - Facility name(s)					
Facility Information					
Facility Name					
Facility Phone Number	Fa	cility E	mail Address		
Potable water is provided (water that is safe to drink)	es	No (p	lease provide details)		
The facility is part of the Municipal water system Yes No			lease provide details e.g., well)		
The facility is part of the Municipal sewerage system Yes			No (please provide details e.g., septic system)		
Premise Information Owned		Leased/Rented			
Will you be providing food?					
No, all food will be provided by the families.					
Yes, prepared by me. Yes, prepared by a permitted kitchen or catering company					
Name and address of permitted kitchen or catering company:					
Business Type Sole Proprietorship (owned by one person) Not applicable					
Proposed Type of Care					
Please check one					Proposed Capacity
Family Child Care. The licensee is a responsible adult, and personally provides care, within the licensee's personal residence, to no more than 7 children					
In-Home Multi-Age Child Care. The licensee personally provides care, within the licensee's personal residence, to no more than 8 children of various ages					
VCH posts information about Licensed Facilities on its website http://www.inspections.vcha.ca/					
I hereby apply for a Community Care Facility Licence and agree to abide by the regulations made under the authority of the <i>Community Care</i> and Assisted Living Act. I certify that the information I have provided is correct to the best of my knowledge.					
Date (dd/mmm/yyyy) Licensee Name			Licensee Signature		