APPROVAL FOR CHILD DAY CARE

☐ Town Zoning Department
☐ Town Building Department
☐ Town Fire Marshal
☐ Director of Health

AN ☐ Inspection — **Reason for Approval Request**
☐ Architectural Review _____
☐ Administrative Review _____

HAS BEEN COMPLETED ON:

☐ Child Day Care Center – Program Name: _____ Lic.# _____
☐ Group Day Care Home – Program Name: _____ Lic.# _____

LOCATED AT: _____
(Street Address)

_____
(Town) *(State)* *(Zip)*

IS CONSTRUCTED IN ACCORDANCE WITH APROPRIATE USE GROUPS AND:

☐ Connecticut State Building Code (CGS sec. 29-252-1c)
☐ Connecticut State Fire Safety Code (CGS sec. 29-292-8d)
  ☐ New Day Care Occupancies
  ☐ Existing Day Care Occupancies
☐ Other _____
(list code title, edition, and section)
☐ Town Zoning Regulations
☐ Health Ordinances

☐ **PRELIMINARY APPROVAL IS GRANTED**
☐ **FINAL APPROVAL IS GRANTED**

Signed:_____

Title:_____

Town:_____

Date:_____