MARYLAND STATE DEPARTMENT OF EDUCATION Office of Child Care

NOTICE OF INTENT TO OPERATE A NEW CHILD CARE FACILITY

Complete all information and submit to the Office of Child Care (OCC).

If available, please attach a site plan and a floor plan of the facility. The purpose of submitting plans to the OCC prior to construction or changes being made is to allow the OCC time to review the plans and to provide consultation and recommendations. NAME OF FACILITY: ADDRESS: _____ Zip Code NAME OF OPERATOR: CONTACT PERSON: Telephone Number Email Address ADDRESS: ___ City Zip Code State PROPOSED OPENING DATE: _____ PROPOSED BUILDING Will the facility be housed in an existing building? □ VES □ NO

1.	will the facility be housed in an existing building?				
	If YES, describe the building's previous and/or current use:				
	Date of construction (if existing building):				
2. If existing building, will any alterations or additions be made to the building's structure? \Box YES \Box NO					
	If YES, describe:				
3.	List all permits that will be obtained from local jurisdiction (building, plumbing, zoning, etc.):				
4.	Is the building a multi-use building? YES NO				
	If YES, describe all other uses:				
5.	. Is the building heated by a Boiler? \square YES \square NO				
6.	Type of water supply: \square Public \square Well water				
7.	Type of sewage disposal: ☐ Public ☐ Septic				
8.	Is there a swimming pool on the premises? \square YES \square NO				
	If YES, describe:				
	Is the pool to be used by children in care at the facility? \square YES \square NO				
Q	Describe the proposed outdoor play area to be used for child care:				

MARYLAND STATE DEPARTMENT OF EDUCATION Office of Child Care

PROPOSED SCOPE OF SERVICE

1.	Months of Operation:				
2.	Days of Operation:				
3.	Hours of Operation:				
4.	Ages to be served (be specific):				
5.	Capacity: (Note: Capacity is established by the OCC based on available space, staff, equipment, and sanitary facilities. It is beneficial to have the building approved by the local jurisdiction (zoning, U&O, fire) for the maximum number of children.)				
Total planned capacity:		under 2 years old	over 2 years old		
Proposed capacity at opening:		under 2 years old	over 2 years old:		
<u>PR</u>	OPOSED FOOD SERVICE	<u>.</u>			
1.	Type of Food Service:	☐ Carried Lunch	☐ Catered		
		☐ Lunch prepared at Facility	☐ Snacks prepared at Facility		
		☐ Other, explain:			
2.	Describe existing kitchen equipment and fixtures:				
	Note: a food prep sink and a sep preparing meals and/or snacks.	parate handwashing sink that prevents cr	coss contamination is needed if the program is full day and will be		
Signature and Title			Date		