

# **DAY CARE LICENSE APPLICATION**

License must be renewed each year before January 1<sup>st</sup>

Date of Application \_\_\_\_\_

\_\_\_\_\_  
Name of Day Care

\_\_\_\_\_  
Owner of Building

\_\_\_\_\_  
Address of Day Care

\_\_\_\_\_  
Owner Address

\_\_\_\_\_  
Business Telephone Number

\_\_\_\_\_  
City State Zip Code

**Type of Firm**

- Individual
- Partnership
- Corporation

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Name of Person – To Whom License Is to Apply

\_\_\_\_\_  
Applicant's FULL NAME / PRINTED

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Applicant's Home Address

\_\_\_\_\_  
Applicant's Title

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Driver's License Number State

\_\_\_\_\_  
Number of Employees

Article 23A, Section 48 Certificate of Compliance With Worker's Compensation Act of Maryland Annotated Code Requires Municipal Governments to Obtain Prior to Issuing a License.

- (1) A certificate of compliance with the Maryland Workers' Compensation Act or
- (2) The number of a workers compensation insurance policy or binder.

\_\_\_\_\_  
Policy or Binder Number

\_\_\_\_\_  
State License Number

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The cost of the license shall be **\$25.00** dollars per year. Please make check or money order payable to:  
**THE CITY OF DISTRICT HEIGHTS.**

***NOTE: You must include a copy of your Certificate from PG or Maryland Department of Human Resources ChildCare Division. Failures to provide a copy will prohibit the issuance of the City License.***

\_\_\_\_\_  
District Heights License Number