NOTICE OF FORM CHANGE NO. 05-	DATE 03/28/2005	
To: County Welfare Director Supply Clerk / Forms Coordinator	FROM: Forms N (916) 65	Management Unit 57-1907
<ul> <li>         ☐ Community Care Licensing District Offices     </li> <li>         ☐ Private and Public Adoption Agencies     </li> </ul>	□ District Attorney □ Other	
Listed below is information regarding a form ch	ange. Only applicable information is sh	nown.
This notice updates your Department of Social	Services County Forms Catalog.	
FORM NUMBER AND TITLE LIC 9217 - Pre-Licensing F	Readiness Guide - Family Child Care F	lome
ORDER UNIT EACH  Free	Sold ESTIMATED PRICE	INITIAL SUPPLY SENT  ☐ Yes ☑ No
New ☐ Revised 3/05	REPLACES	☐ Obsolete
REQUIRED FORM- REQUIRED F  No Change Permitted Substitute	FORM- Permitted With Prior DSS Approval	Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:  Department of Social Services Warehouse P.O. Box 980788  West Sacramento, CA 95798-0788	Other:	
FORMS DIS	SPOSITION AND SPECIAL INSTRUC	TIONS
DISPOSITION OF OLD SUPPLY  Use until exhausted	Destroy	
USE NEW FORM  ☐ When supply available in DSS Warehouse	⊠ Use new form effective	3/05
USE FORM IN ACCORDANCE WITH  ☐ All County Letter No. ☐ Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE Attached is a Reproducible Copy		

Check on the internet to see if forms are available at www.dss.cahwnet.gov

For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: fmudss@dss.ca.gov. Contact Language Services for other languages at (916) 445-6778 or by electronic mail at LTS@dss.ca.gov.

## PRE-LICENSING READINESS GUIDE - FAMILY CHILD CARE HOME

Before you receive a Family Child Care Home license, the licensing agency will visit your home to make sure that your home meets licensing requirements. Below is a checklist of requirements to help you get ready for our visit. As each requirement is completed, please put a check mark next to it. **When your home has met all of the requirements:** 

- SIGN AND DATE THE FORM AT THE BOTTOM.
- MAIL THIS FORM BACK TO THE LICENSING AGENCY (When the licensing agency receives this form, it will mean that your home meets all of the requirements and you are ready for your visit.)
- A LICENSING PROGRAM ANALYST WILL CALL YOU TO SET UP A DATE FOR OUR VISIT TO YOUR HOME.

THE FOLLOWING ITEMS ARE REQUIRED BY REGULATION		
All adults living in the home and assistant and/or substitute care providers have submitted fingerprints and child abuse index check forms to Department of Justice and received a California clearance or exemption.		
Home is neat and clean.		
All fireplaces, woodstoves, and/or heaters are screened to prevent access by children.		
Home has a fully charged fire extinguisher which is at least a 2A:10BC.		
Home has a working smoke alarm.		
Home has a working telephone.		
All poisons are locked.		
Hazardous materials are kept out of the reach of children (inaccessible):		
☐ Kitchen: all sharp utensils and cutlery, cleaning supplies, medicines, drawers and cabinets with liquor, plastic bags, and sharp things or small things children can swallow, etc.		
□ Bathroom: shampoo, mouthwash, toothpaste, medicines, perfumes/lotions/cosmetics, solvents, etc.		
☐ Garage and Outdoors: solvents, gasoline, oil, turpentine, paint, sharp tools, lawn mower, gardening tools, poisonous plants, abandoned machinery, old refrigerators/freezers, old vehicles, etc.		
All firearms and any other weapons are not loaded and are locked up. Ammunition is stored and locked away separately from firearms.		
Outdoor play area is free from defects or dangerous conditions. Play equipment is securely anchored according to manufacturer directions.		

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	Outdoor play area is fenced.
	-or- Outdoor play area is not fenced and the plan for supervision is:
	If caring for children under 5 years old, home has a gate(s) blocking the stairs.
	Home does not have a swimming pool, spa, hot tub, fishpond, or any other bodies of wateror-
	Home <u>does</u> have a, covered or fenced. (Write in type of body of water)
	The fence is at least 5 feet feet high with a self-latching gate that opens away from the pool or body of water. If using a cover, it must support the weight of an adult and shall be locked when pool is not in use.
	Toys and playthings are safe, clean, and appropriate for the age of the children.
	Babywalkers, bouncers, jumpers, and similar items will not be used for children in care and are kept inaccessible.
	A copy of the deed or property tax statement, or if renting or leasing, a copy of the lease or rental agreement is available at the home.
MA	ERE ARE MANY OTHER THINGS YOU CAN DO TO MAKE YOUR HOME SAFE THAT Y NOT BE IN REGULATIONS. IF YOU HAVE ANY QUESTIONS, CALL YOUR LICENSING OGRAM ANALYST.
ADI	DITIONAL NOTES:
	home meets all of the above requirements and I am ready for a pre-licensing pection.
SIGI	NATURE DATE
PRI	NT YOUR FULL NAME
	p a copy of this form and use the area below to note the date and time we will visit your ne and the name and telephone number of your Licensing Program Analyst.

NAME OF MY LICENSING PROGRAM ANALYST: TELEPHONE # LIC 9217 (3/05)

DATE FOR MY HOME VISIT:

TIME OF HOME VISIT: