NOTICE OF FORM CHANGE NO. 08-020					DATE
				1/30/2008	
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Ma (916) 657-		nt Unit
Listed below is information re	garding a form change. On	ly applicabl	e information is shov	vn.	
This notice updates your Cal	ifornia Department of Socia	al Services	(CDSS) County Forn	ns Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	LIC 700 (1/08) Identification and Emerge	ency Inform	ation - Child Care Ce	enters/Far	mily Child Care Homes
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	ESTIMATED PRICE			INITIAL SUPPLY SENT Yes No
☐ New ☐ Revised	DATE OF FORM 1/08	PREPLACES 9/07			Obsolete
REQUIRED FORM- No Change Permitted	REQUIRED FORM- Substitute Permitte	ed With Prio	r DSS Approval	Rec	commended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788		☐ OTHER: ☐ INTERNET: ☐ INTRANET:			
	FORMS DISPOSITION	N AND SP	ECIAL INSTRUCTIO	NS	
Use until exhausted		☐ Destroy			
USE NEW FORM When supply available in DSS Warehouse		☐ Use new form effective 1/08		1/08	
USE FORM IN ACCORDANCE WITH ☐ All County Letter No. ☐ Other (specify)					
ADDITIONAL INFORMATION REGARDING FOR http://www.dss.cahwnet.gov/		ish/lic700.p	df		

Camera-ready copies are currently available on the CDSS Internet. Go to www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm.

Form information on forms not listed in the catalog, you may contact FMU at (916) 657-1907 or by e-mail at fmudss@dss.ca.gov.

Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.