



City of Coeur d'Alene
 Municipal Services Department
 710 Mullan Avenue
 Coeur d'Alene, Idaho 83814
 (208) 769-2229
 kathylew@cdaid.org

(Office Use Only)

Amount Paid _____
 Receipt # _____
 Date _____
 License # _____
 Date Temporary Issued _____
 Date Perm Lic Issued _____ by _____

Childcare Facility License Application

Facility License 1-12 Children \$60.00 / 13+ Children \$100 Fee –Expires Annually on December 31st

NEW

RENEWAL (Complete This Page ONLY)

- If Applicant is a **Partnership**, each partner must fill out an application.
- If Applicant is a **Corporation**, the application shall be completed by the manager. A corporation must be authorized to do business in the State of Idaho.

NECESSARY DOCUMENTATION

1. See checklist for requirements. All care providers or persons who reside on premises or may regularly be on premises of facility, including volunteers, 12 years of age and older must obtain an individual license.
2. Owner/Operator must have completed Criminal History Background check results (NOTE: May take up to 90 days) and have completed all requirements for individual owner/operator license.
3. Business must have completed Health Inspection.
4. Business must have completed Fire Inspection.

FACILITY INFORMATION

Name of Facility: _____ Facility Phone Number: _____
 Facility Physical Address: _____
 Facility Mailing Address: _____
 Email: _____
 Owner/Operator Name: _____ Social Security Number: _____ Date of Birth _____
 Email: _____ Cell Phone: _____
 Manager Name: _____ Cell Phone: _____ Email: _____
 Hours of Operation: Open _____ Close _____
 Maximum number of children you provide care for in any 24 hour period: _____
 Maximum number of children on premises at any one time: _____
 Maximum number of staff present on premises at any one time: _____
 Do you provide overnight care (after 8 PM or prior to 6 AM): _____
 Have you had an ICCP child in your program within the last year? Yes No
 Are you a current approved ICCP provider? Yes No
 If yes, is this your first ICCP health inspection? Yes No

APPLICANT CERTIFIES AS FOLLOWS:

That they are a good citizen of the United States; over eighteen (18) years of age; of good reputation; the information listed on this application is complete and true to the best of their knowledge, and that they shall continue to be in compliance with City Code 5.68, which related to I.C. 39-1118, throughout the terms of this license.

Applicant Signature

Date

