



Application for Plan Review of Proposed Child Daycare Facility

\$250 Fee (non-refundable)

Date of Application: _____

Day Care Facility Name: _____

Address: _____ ☐ Westport ☐ Weston ☐ Easton

Contact Person: _____

Contact Phone : _____

Contact E-Mail : _____

Year Built for Daycare Facility: _____

If pre-1978, a comprehensive lead inspection of the facility is required (paint, dust, water, and soil.)

Sewage Disposal (select one): City Sewer _____ Septic System _____

Water Supply (select one): City Water _____ Private Well _____

Proposed License Capacity: _____

What age groups of children will be present? _____

Was this location previously approved as a child daycare facility? ☐ Yes ☐ No

If yes, are you proposing expanding beyond the area that was previously approved?

☐ Yes ☐ No

Printed Name of Applicant: _____

Signature of applicant: _____

A floor plan of the entire proposed day care area is required with application submission.

For Office Use Only

Amount Paid _____ **Date Paid** _____ **Initial** _____