



Family Home Child Care Request to Change Capacity

Information below to be completed by licensee.

Printed licensee's name	Provider ID #	Anniversary date
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I request capacity change in the number of children that I am licensed for WAC 110-300B-5700

Current licensed capacity	Age range	Number under two years of age	Requested capacity	Age range	Number under two years of age
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Complete the following information:

Indoor play space: I have _____ square feet of licensed play space for children in my home. This does not include hallways, bathrooms, or closets. A minimum of 35 sq. ft. per child is required by WAC 110-300B-4225.

Outdoor Play Space: I have _____ square feet of fenced useable outdoor play space at my home. A minimum of 75 sq. ft. per child is required by WAC 110-300B-4925.

Equipment: I have a sufficient quantity and variety of appropriate indoor/outdoor play equipment for _____ children required by WAC 110-300B-5000 and 110-300B-6600. Attach a sample list of your learning and play materials to this request.

Nap Equipment: I have # _____ mats, _____ cots, _____ beds, _____ cribs, and/or _____ playpens for napping children by WAC 170-296A-3750.

Licensee information:

Years of licensed experience	First aid expiration date	CPR expiration date	HIV/AIDS training date	Total hours of ongoing training	STARS (Child Care Basics)
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List all staff:

Name	Resume	TB test result	CPR expiration date	First Aid expiration date	HIV/AIDS training	STARS (Child Care Basics)	Background authorization submitted
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	

Attach copies of documentation for your DCYF file of Early Childhood Education classes taken by you and your primary assistant. Include documentation of STARS training completed. (See WAC 110-300B-1175, 110-300B-1800 and 110-300B-1910)

Check all that apply. I use: City water City sewer Private water system and/or Private sewage system. Consult your local health department to ensure your septic system and water supply is approved for the additional use you are proposing. (WAC 110-300B-1375)

I declare this information is true and accurate to the best of my knowledge and I understand that my licensor may make a site visit to verify the information.

Licensee signature

Date

Information below to be completed by DCYF licensor.

Licensing safety assessment: What rooms will be used for licensed care? Can the environment accommodate this request? Are there sufficient supplies? Does the licensee provide required supervision? If a site visit was conducted were there health and safety violations?

Complaint history

Is there a history of valid complaints? Yes No If yes, explain:

Site visit date

DCYF action

Approved Not approved

Licensor: Document decision in provider notes

If denied, an explanation is required below.

Licensor signature

Date

Supervisor signature

Date

Capacity/Ratio table to implement WAC 110-300B-5700

Staff and licensee minimum requirements	Age range	Maximum number of children by age group					Maximum capacity
Licensee working alone	Birth through 12 years	2	or	3			6 Maximum of 2 children under the age of 2 not walking independently
Less than one year of experience		Under 18 months of age		Under 2 years of age (One must be Walking independently)			
Licensee working alone	18 months through 12 years	2	or	4			8 All children must be walking independently
At least one year of experience		18 months to 2 years Both must be walking independently		Under 3 years of age (Not more than 2 under 2 years of age and must be walking independently)			
Licensee working alone	3 years through 12 years						10
At least two years of experience							
Licensee working with another staff person (two staff total)	Birth through 12 years	2	and	1	and	4	9
Licensee has at least one year of experience		Under 18 months of age		18 months to 2 years and walking independently		2 years to 3 years of age	
Licensee working with another staff person (two staff total)	Birth through 12 years	4	and	2	and	4	12 Maximum 4 children not walking independently
Licensee has two or more years of experience		Under 18 months		18 months to 2 years and walking independently		2 years to 3 years of age	
Licensee working with another staff person (two staff total)	2 years through 12 years						12
Licensee has two or more years of experience							
Walking independently means being able to stand and move about easily without the aid or assistance of holding on to an object, wall, equipment or other person.							