

Child Day Center Pre-Application Consultation Licensure Packet – Order Form

Date:

Ordered By:

Name:	<input type="text"/>
Street Address:	<input type="text"/>
City/State:	<input type="text"/>
Zip Code:	<input type="text"/>
Telephone:	<input type="text"/>

Deliver To: **Same Address As Above**

Name/Company:	<input type="text"/>
Street Address:	<input type="text"/>
City/State:	<input type="text"/>
Zip Code:	<input type="text"/>
Telephone:	<input type="text"/>
Fax:	<input type="text"/>
Contact Name:	<input type="text"/>

Description	Quantity Requested	Cost per Set of Materials	Amount Total
CDC Phase 1 Licensure Packet		\$30.00	

Payment must be with business check, certified check or money order. Please make all checks payable to: ***Treasurer of Virginia***

Personal checks, cash or credit cards will NOT be accepted.

A fee of \$25.00 will be charged for checks returned due to insufficient funds.

Mail completed order form and payment to:

Virginia Department of Social Services
Division of Licensing Programs
801 East Main Street, 9th Floor
Richmond, VA 23219-2901

Please allow 3 to 4 weeks to process your request.

INTERNAL USE ONLY

Order Completed:	<input type="text"/>
Ship Date	<input type="text"/>