

*Virginia Department of Social Services (VDSS)
Division of Licensing Children's Programs*

**RENEWAL APPLICATION FOR A LICENSE TO OPERATE A
FAMILY DAY SYSTEM (FDS)**

- Complete this application in its entirety, as appropriate.
- Type or print legibly using permanent, blue or black ink and retain a copy for your records.
- Review the application carefully to ensure it is complete before submitting.
- Contact your regional VDSS licensing office if there are any questions regarding the completion of this application.

If the application is incomplete, the applicant will be notified in writing. If the applicant does not submit a complete application including all required attachments within 30 days from the notification, all materials except the nonrefundable fee will be returned to the applicant.

For Division of Licensing Programs (DOLP) Use Only						
DATE RECEIVED:	RECEIVED BY:	CHECK/MO #:	AMT RECEIVED:	INSPECTOR:	APPLICATION #:	FILE #:

PART 1: APPLICANT INFORMATION

APPLICATION AGREEMENT

In making this application, I agree that:

1. I am in receipt of and have read a copy of the laws and regulations applicable to the type of facility for which I am making application.
2. It is my intent (a) to comply with applicable laws and regulations and (b) to maintain compliance with them if I am so licensed.
3. I understand that representatives of the Department of Social Services are authorized to investigate all aspects of facility operations, to inspect the facility, and to make any investigations necessary concerning the circumstances surrounding this application. I understand that if the facility is licensed, the Department's representatives will make announced and unannounced visits to investigate complaints received and to determine continuing compliance.
4. In the event this application is denied, I understand that I have appeal rights that are explained in the regulation, *General Procedures and Information for Licensure*.
5. I am aware that it is a misdemeanor for any person to interfere with an authorized agent of the Commissioner in the discharge of his duties, make false or untrue reports with respect to the operation of the facility, engage in the operation of a facility without first obtaining a license, or serve more persons than the maximum capacity stipulated on the license.

This application must be signed by an applicant or agent named on the Type of Business Entity – "Identifying Information"

I hereby attest that the information contained in this application, including the attachments, are truthful and correct under penalty of perjury. Falsification of application information is grounds for denial or revocation of the license to operate a facility. An application may be withdrawn at any time the applicant so desires, but the application fee will be forfeited.

Signature of Applicant

Date

Printed Name of Applicant

Business Name (if applicable)

FAMILY DAY SYSTEM INFORMATION (THIS SECTION MUST BE COMPLETED IN ITS ENTIRETY)

Name of Family Day System		Director			
		Primary Phone Number		Fax Number	
Street Address of Family Day System		City/County	State		Zip Code
Mailing Address of Family Day System (if different from physical address)		City/County	State		Zip Code
E-mail Address (used for VDSS correspondence only)					
Number of Homes to be approved		Counties and Cities of Homes			

TYPE OF CARE TO BE OFFERED OR CURRENTLY OFFERED

Age Group	Half Day Care	Full Day Care	Before and After School Care	Evening Care (7 p.m.-1 a.m.)	Overnight Care (After 1 a.m.)	TOTAL
Infants and Toddlers (under 2 years old)						
Preschool: 2 years old						
Preschool: 2-5 years old						
School Age: 6-9 years old						
School Age: 10-14 years old						
TOTAL						

PART 2: BUSINESS ENTITY TYPE APPLYING FOR LICENSURE

Check only *ONE* box and submit *ONLY* the corresponding business entity page

Individual/Sole Proprietor	→ Go to Business Entity A (See Page 7)
Partnership <p>A general partnership (sometimes simply referred to as a “partnership”) is an association of two or more persons to carry on, as co-owners, a business for profit. Each partner contributes money, property and/or services in return for an interest in the general partnership, shares in the profits and losses of the general partnership’s business, and has equal rights in the management and conduct of the partnership’s business.</p> <p>A limited partnership, is a type of partnership distinct from a general partnership, is formed by two or more persons with at least one general partner and one limited partner. The general partners exercise control over the management of the limited partnership’s business.</p> <p><i>*Partnership Documentation Required</i></p>	→ Go to Business Entity B (See Page 8)
Corporation <p>A corporation is an artificial person or legal entity managed by a board of directors, consisting of one or more individuals, who collectively elect officers to run the corporation’s day-to-day business activities.</p> <p><i>*Corporation Documentation Required</i></p>	→Go to Business Entity C (See Page 9)
Association <p>Business associations are organizations that bring together business owners from a specific area. They range from nationwide associations to those that encompass businesses in individual states, counties, cities, or neighborhoods.</p>	→Go to Business Entity D (See Page 10)
Limited Liability Company (LLC) <p>A limited liability company is an unincorporated association of one or more members (the owners) who share in the profits and losses of the company’s business. It is managed in accordance with an operating agreement by one or more members (member-managed) or by one or more managers (manager-managed). A limited liability company is a separate legal entity and, generally, the members and managers are not liable for the obligations of the limited liability company.</p> <p><i>*LLC Documentation Required</i></p>	→Go to Business Entity E (See Page 11)

<p>Public Agency</p> <p>“Public Agency” is defined to mean the Government of the United States; local government; state agency, including any department, institution, authority, instrumentality, board, or other administrative agency of the Commonwealth</p>	<p>→Go to Business Entity F (<i>See Page 12</i>)</p>
<p>Business Trust</p> <p>A business trust is an unincorporated association whose governing instrument, sometimes referred to as a declaration of trust, provides that one or more trustees will manage property or conduct for-profit business activities on behalf of one or more beneficial owners. A business trust is a separate legal entity and, generally, its trustees and beneficial owners are not liable for the obligations of the business trust.</p> <p><i>*Business Trust Documentation Required</i></p>	<p>→Go to Business Entity G (<i>See Page 13</i>)</p>
<p>Religious Organization (if not a business type listed above)</p> <p>A religious organization is generally a nondenominational or interdenominational organization and has a principal purpose of advancing religion.</p>	<p>→Go to Business Entity H (<i>See Page 14</i>)</p>

PART 3: REQUIRED ATTACHMENTS

FAMILY DAY SYSTEM	√ If Submitted
1. FEE PAYABLE TO “TREASURER OF VIRGINIA” (see Part 4)	
2. One Business Entity Section Only A,B,C,D,E,F,G or H (see corresponding page of this application) <i>*This page must match business entity checked in Part 2</i>	
3. Background Checks for any <u>NEW</u> individuals listed under the Business Entity page <ul style="list-style-type: none"> • Sworn Disclosure Statement (See VDSS website) • Criminal History Record Report obtained from the Virginia State Police • Child Protective Services Central Registry Check obtained from the Virginia Department of Social Services • Out-of-State Central Registry Check *effective 7/1/17 for any individual 18 years and older who has lived in another state in the past five years. • Out-of-State Criminal History Name Check for any other state a person has resided in the past five years. • Out-of-State Sex Offender Registry Check for any other state a person has resided in the past five years. <p>Background checks must be completed within 90 days prior to submitting an application. Original background checks MUST be available at the facility for inspection. Do not mail background checks in with the application.</p>	
4. Reference Letters for any <u>NEW</u> individuals listed under the Business Entity page Reference letters must be dated no more than 12 months prior to the date of this application from three persons who are not related to the individual by blood or marriage who have known him/her for at least one month, and who can attest to his/her character and reputation.	
5. Statement of Written Goals and Objectives, if changed since the previous license was issued	
6. Written documentation of the center’s “chain of command” or organizational chart to include all individuals who are responsible for operational and management decisions, if changed since the last license was issued	
7. Staff Information Sheet In addition to executive, administrative, supervisory, and child-placing staff, this list must include but is not limited to student interns, trainees, mentors, transporters, recruiters, trainers, clerical support, etc. Please include full-time, part-time, and contract workers.	
8. Name of the management company that operates the agency, if other than the licensee, if changed since the previous license was issued	
9. Written job descriptions for all staff, if changed since the previous license was issued	
10. Copies of policies and procedures relating to the operation of the system, personnel, and to member homes, if changed since the previous license was issued	
11. Copies of all forms used by the system (if different from the model forms provides by the Department of Social Services) especially those used in homes’ records and those used in children’s records, if changed since the previous license was issued	
12. Copies of any brochures, if changed since the previous license was issued	
13. Description of method of transportation, if transportation provided, if changed since the previous license was issued	
14. Written schedule of payments to be made to homes that are members of the system. This schedule shall specify the amount of payment, conditions of payment, and frequency of payment. Please indicate this if this has changed since the previous license was issued.	
15. Directory of approved homes that are members of the system	

PART 4: FEES

Personal check, money order, or certified check must be made payable to “Treasurer of Virginia.” Fees are non-refundable. There will be a service charge of \$50.00 for any check that must be returned due to insufficient funds.

The fee for FDS application processing: **\$70**

*An application will not be processed until the fee has been received.

BUSINESS ENTITY C: CORPORATION

A corporation is an artificial person or legal entity managed by a board of directors, consisting of one or more individuals, who collectively elect officers to run the corporation's day-to-day business activities.

CORPORATION Domestic Corporation Foreign Corporation

Identifying Information

Name of Corporation Applying for License: _____

Corporate Mailing Address:

Street/P.O. Box _____ City _____ State _____ Zip Code _____

Corporate Tax ID Number: _____

Designated Contact Person: _____ Title: _____

Phone Number _____

Provide the following information on each officer of the corporation. (Attach additional pages if needed.)

	<i>Name</i>	<i>Address</i>
President	_____	_____

Vice President	_____	_____
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Secretary	_____	_____
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Treasurer	_____	_____
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List the name, title and address of any agent(s) other than the officers who is empowered to act on behalf of the corporation in matters relating to the facility:

<i>Name</i>	<i>Title</i>	<i>Address</i>
_____	_____	_____
_____	_____	_____

Required Attachments

Certificate of Incorporation issued by the State Corporation Commission or for corporations formed under laws of a jurisdiction other than Virginia, Certificate of Authority to Transact Business in Virginia issued by the State Corporation Commission.

Documentation from the State Corporation Commission (SCC) that the corporation is active AND in good standing

Articles of Incorporation

Fictitious Name (Do Not fill out this section if fictitious name does not apply)

A fictitious name is a name that a person (individual or business entity) uses instead of the person's true name, usually in the course of transacting or offering to transact business. It is sometimes referred to as an "assumed name" or "trade name," and it is often identified after a person's true name with the abbreviation "t/a" ("trading as"), "dba" ("doing business as"), or "aka" ("also known as"). **If the business entity chooses to form another legal business entity for business and tax purposes, the individual must file with the proper designated authority.** If documentation is provided reflecting the Fictitious Name, the license will be issued as (Name of the Licensee d.b.a. or t/a and then the Name of Legal Business Entity). For information regarding requirements for the use of a fictitious name in Virginia visit <https://www.scc.virginia.gov/clk/befaq/fict.aspx>

Required Attachment ___ *Documentation of the legal fictitious name registered with the proper designated authority*

BUSINESS ENTITY D: ASSOCIATION

Business associations are organizations that bring together business owners from a specific area. They range from nationwide associations to those that encompass businesses in individual states, counties, cities, or neighborhoods.

ASSOCIATION

Identifying Information

Name of Association Applying for License: _____

Association Mailing Address: _____
Street/P.O. Box City State Zip Code

Association Tax ID Number: _____

Designated Contact Person: _____ Title: _____

Phone Number _____

Provide the following information on each officer of the association. (Attach additional pages if needed.)

Name Title (i.e. President, Sr. Vice President, Secretary and Treasurer) Address

List the name, title and address of any agent(s) other than the officers who is empowered to act on behalf of the association in matters relating to the facility:

Name Title Address

Required Attachments

Constitution or bylaws that delineate responsibilities for the operation and maintenance of the facility for which the association is applying for licensure;

Fictitious Name (Do Not fill out this section if fictitious name does not apply)

A fictitious name is a name that a person (individual or business entity) uses instead of the person's true name, usually in the course of transacting or offering to transact business. It is sometimes referred to as an "assumed name" or "trade name," and it is often identified after a person's true name with the abbreviation "t/a" ("trading as"), "dba" ("doing business as"), or "aka" ("also known as"). ***If the business entity chooses to form another legal business entity for business and tax purposes, the individual must file with the proper designated authority.***

If documentation is provided reflecting the Fictitious Name, the license will be issued as (Name of the Licensee d.b.a. or t/a and then the Name of Legal Business Entity). For information regarding requirements for the use of a fictitious name in Virginia visit

<https://www.scc.virginia.gov/clk/befaq/fict.aspx>

Required Attachment Documentation of the legal fictitious name registered with the proper designated authority

BUSINESS ENTITY E: LIMITED LIABILITY COMPANY

A limited liability company is an unincorporated association of one or more members (the owners) who share in the profits and losses of the company's business. It is managed in accordance with an operating agreement by one or more members (member-managed) or by one or more managers (manager-managed). A limited liability company is a separate legal entity and, generally, the members and managers are not liable for the obligations of the limited liability company.

LIMITED LIABILITY COMPANY (LLC)

Domestic LLC

Foreign LLC

Identifying Information

Name of LLC Applying for License: _____

LLC Mailing Address: _____
Street/P.O. Box City State Zip Code

LLC Tax ID Number: _____

Designated Contact Person: _____ Title: _____
Phone Number _____

Provide the following information on each manager and member or other persons authorized to manage the business and affairs of the LLC. (Attach additional pages if needed.)

<i>Name</i>	<i>Title</i>	<i>Address</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List the name, title and address of any agent(s) other than the members and managers who is empowered to act on behalf of the LLC in matters relating to the facility:

<i>Name</i>	<i>Title</i>	<i>Address</i>
_____	_____	_____
_____	_____	_____

Required Attachments

Certificate of Organization or Certificate of Registration (for LLCs formed under the laws of a jurisdiction other than Virginia) issued by the State Corporation Commission;

Articles of organization

Fictitious Name (Do Not fill out this section if fictitious name does not apply)

A fictitious name is a name that a person (individual or business entity) uses instead of the person's true name, usually in the course of transacting or offering to transact business. It is sometimes referred to as an "assumed name" or "trade name," and it is often identified after a person's true name with the abbreviation "t/a" ("trading as"), "dba" ("doing business as"), or "aka" ("also known as"). **If the business entity chooses to form another legal business entity for business and tax purposes, the individual must file with the proper designated authority.**

If documentation is provided reflecting the Fictitious Name, the license will be issued as (Name of the Licensee d.b.a. or t/a and then the Name of Legal Business Entity). For information regarding requirements for the use of a fictitious name in Virginia visit

<https://www.scc.virginia.gov/clk/befaq/fict.aspx>

Required Attachment Documentation of the legal fictitious name registered with the proper designated authority

BUSINESS ENTITY F: PUBLIC AGENCY

“Public Agency” is defined to mean the Government of the United States; local government; state agency, including any department, institution, authority, instrumentality, board, or other administrative agency of the Commonwealth

PUBLIC AGENCY

Identifying Information

Name of Public Agency Applying for License: _____

Public Agency Mailing Address: _____
Street/P.O. Box City State Zip Code

Public Agency Tax ID Number: _____ Phone Number _____

Name and Title of Person Responsible for the Facility (including hiring the facility director/administrator):

Name

Title

Any agent other than the person listed above who is empowered to act on behalf of the public agency in matters relating to the facility: _____

Fictitious Name (Do Not fill out this section if fictitious name does not apply)

A fictitious name is a name that a person (individual or business entity) uses instead of the person's true name, usually in the course of transacting or offering to transact business. It is sometimes referred to as an "assumed name" or "trade name," and it is often identified after a person's true name with the abbreviation "t/a" ("trading as"), "dba" ("doing business as"), or "aka" ("also known as"). ***If the business entity chooses to form another legal business entity for business and tax purposes, the individual must file with the proper designated authority.***

If documentation is provided reflecting the Fictitious Name, the license will be issued as (Name of the Licensee d.b.a. or t/a and then the Name of Legal Business Entity). For information regarding requirements for the use of a fictitious name in Virginia visit <https://www.scc.virginia.gov/clk/befaq/fict.aspx>

Required Attachment *Documentation of the legal fictitious name registered with the proper designated authority*

BUSINESS ENTITY G: BUSINESS TRUST

A business trust is an unincorporated association whose governing instrument, sometimes referred to as a declaration of trust, provides that one or more trustees will manage property or conduct for-profit business activities on behalf of one or more beneficial owners. A business trust is a separate legal entity and, generally, its trustees and beneficial owners are not liable for the obligations of the business trust.

BUSINESS TRUST

Domestic Business Trust

Foreign Business Trust

Identifying Information

Name of Business Trust Applying for License: _____

Business Trust Mailing Address: _____

Business Trust Tax ID Number: _____

Street/P.O. Box	City	State	Zip Code
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Designated Contact Person: _____ Title: _____

Phone Number _____

Provide the following information on each trustee, beneficial owner and any officer of the Business Trust. (Attach additional pages if needed.)

<i>Name</i>	<i>Title</i>	<i>Address</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

List the name, title and address of any agent(s) other than the trustees, beneficial owners or officers who is empowered to act on behalf of the business trust in matters relating to the facility:

<i>Name</i>	<i>Title</i>	<i>Address</i>
_____	_____	_____
_____	_____	_____

Required Attachments

Certificate of Trust or Certificate of Registration (for trusts formed under the laws of a jurisdiction other than Virginia) issued by the State Corporate Commission

Articles of trust

Fictitious Name (Do Not fill out this section if fictitious name does not apply)

A fictitious name is a name that a person (individual or business entity) uses instead of the person's true name, usually in the course of transacting or offering to transact business. It is sometimes referred to as an "assumed name" or "trade name," and it is often identified after a person's true name with the abbreviation "t/a" ("trading as"), "dba" ("doing business as"), or "aka" ("also known as"). **If the business entity chooses to form another legal business entity for business and tax purposes, the individual must file with the proper designated authority.** If documentation is provided reflecting the Fictitious Name, the license will be issued as (Name of the Licensee d.b.a. or t/a and then the Name of Legal Business Entity). For information regarding requirements for the use of a fictitious name in Virginia visit <https://www.scc.virginia.gov/clk/befaq/fict.aspx>

Required Attachment *Documentation of the legal fictitious name registered with the proper designated authority*

BUSINESS ENTITY H: RELIGIOUS ORGANIZATION

A religious organization is generally a nondenominational or interdenominational organization and has a principal purpose of advancing religion.

RELIGIOUS ORGANIZATION

Identifying Information

NOTE: Complete only if the religious organization is not a business type listed in Subsections A-G.

Name of Religious Organization Applying for License: _____

Religious Organization Mailing Address: _____

Street/P.O. Box City State Zip Code Religious
Organization Tax ID Number: _____ Phone Number _____

Name(s) and Title(s) of Person(s) Responsible for the Facility (including hiring the facility director/ administrator):

Name

Title

<i>Name</i>	<i>Title</i>
_____	_____
_____	_____
_____	_____
_____	_____

Any agent other than the person(s) listed above who is empowered to act on behalf of the religious organization in matters relating to the facility:

Name _____

Fictitious Name (**Do Not** fill out this section if fictitious name does not apply)

A fictitious name is a name that a person (individual or business entity) uses instead of the person's true name, usually in the course of transacting or offering to transact business. It is sometimes referred to as an "assumed name" or "trade name," and it is often identified after a person's true name with the abbreviation "t/a" ("trading as"), "dba" ("doing business as"), or "aka" ("also known as"). **If the business entity chooses to form another legal business entity for business and tax purposes, the individual must file with the proper designated authority.** If documentation is provided reflecting the Fictitious Name, the license will be issued as (Name of the Licensee d.b.a. or t/a and then the Name of Legal Business Entity). For information regarding requirements for the use of a fictitious name in Virginia visit <https://www.scc.virginia.gov/clk/befaq/fict.aspx>

Required Attachment *Documentation of the legal fictitious name registered with the proper designated authority*