



Case No. _____
Project No. _____

CITY OF INGLEWOOD
APPLICATION FOR LARGE DAY CARE
FOR 8-14 CHILDREN
(CHAPTER 12, ARTICLE 1.2, INGLEWOOD MUNICIPAL CODE)

Address of Project _____
Name of Applicant _____
Legal Description _____
Request _____

Primary contact person (To whom all correspondence will be sent; to be filled in even if same as applicant.)

Name _____ Day Phone _____
Address _____ City/Zip _____

Days/Hours of Operation _____ Number of Children _____ Ages of Children _____

Recreational Amenities Provided _____

Signature of Applicant

Date

Print

Phone

OFFICE USE ONLY

COMMENTS

ENVIRONMENTAL ASSESSMENT CATEGORICALLY EXEMPT	
<input type="checkbox"/> YES	<input type="checkbox"/> INITIAL STUDY REQUIRED

DATE REC'D _____ BY _____ FEES _____ OTHER CASE _____