



**Child Care Center & School Age Feasibility
Review Checklist**

Facility name:	Name of individual completing this form:	Date:
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Complete the following information regarding your facility and return to your licensor. Write N/A if an item does not apply to your facility.

Outdoor play areas <input type="checkbox"/> Route – safe and reachable method <input type="checkbox"/> Supervision <input type="checkbox"/> Water safety – certified lifeguard <input type="checkbox"/> Fence <input type="checkbox"/> Licensing approval <input type="checkbox"/> Other	Bathrooms <input type="checkbox"/> Toilet Ratios: based on WAC requirements <input type="checkbox"/> Toilet location – hand washing sink <input type="checkbox"/> Age appropriate toilet and sink height <input type="checkbox"/> Vented to the outside <input type="checkbox"/> Urinals <input type="checkbox"/> Privacy needs <input type="checkbox"/> Other
Sewage and liquid waste <input type="checkbox"/> Septic approval, as built, design, location and maintenance plan <input type="checkbox"/> Septic location – playground not to interfere with access to, or operation of, on-site sewage system including the drain field and venting not located on the playground <input type="checkbox"/> Other	Public water system <input type="checkbox"/> Public water system approved by and maintained in compliance with the Department of Health or Local Health Jurisdiction <input type="checkbox"/> Potable water approved for child care center use <input type="checkbox"/> Other
Classrooms <input type="checkbox"/> Capacity <input type="checkbox"/> Flooring <input type="checkbox"/> Other	Water supply <input type="checkbox"/> Local Department of Health approval <input type="checkbox"/> Water temperature <input type="checkbox"/> Other
Lights, fixtures, bulbs <input type="checkbox"/> Emergency lighting, fire marshal requirement <input type="checkbox"/> Covered or shielded <input type="checkbox"/> Other	Water fountains <input type="checkbox"/> Hand washing sinks, attached <input type="checkbox"/> Other
Storage <input type="checkbox"/> Individual belongings <input type="checkbox"/> Food <input type="checkbox"/> Toxics <input type="checkbox"/> Other	Sinks <input type="checkbox"/> Hand washing, classrooms, kitchen <input type="checkbox"/> Food and bottle preparation <input type="checkbox"/> Utility <input type="checkbox"/> Other
Premises <input type="checkbox"/> Other	Exits <input type="checkbox"/> Other
Diaper changing <input type="checkbox"/> Location, next to hand washing sink <input type="checkbox"/> Flooring, moisture impervious <input type="checkbox"/> Sink location, hand washing <input type="checkbox"/> Barrier <input type="checkbox"/> Other	Kitchen <input type="checkbox"/> Access to children, supervision for kitchen activities <input type="checkbox"/> Hood vented to the outside or restricted menu <input type="checkbox"/> Storage <input type="checkbox"/> Dishwasher <input type="checkbox"/> Separate hand washing sink <input type="checkbox"/> Other
Laundry <input type="checkbox"/> Access to children <input type="checkbox"/> Dryer ventilated to outside	Janitorial closet <input type="checkbox"/> Storage, combustibles, flammables <input type="checkbox"/> Vented to outside of building

Electrical Outlets <input type="checkbox"/> Tamper resistant-listed <input type="checkbox"/> Other	Windows <input type="checkbox"/> Screened if opened <input type="checkbox"/> Other	
Heaters <input type="checkbox"/> Shielded <input type="checkbox"/> Other	Stairs and elevated play areas <input type="checkbox"/> Handrails, child height <input type="checkbox"/> Guardrails <input type="checkbox"/> Other	
Bottle Preparation <input type="checkbox"/> Designated sink location <input type="checkbox"/> Other	Flooring <input type="checkbox"/> Moisture impervious <input type="checkbox"/> Other	
Comments: 		
<p>WAC 170-295-0040; WAC 170-297-1035; WAC 170-297-1050</p> <p>Do I have to follow any other regulations or have any other inspections? Prior to becoming licensed by us to operate a child care center, you need to:</p> <p><input type="checkbox"/> Have a certificate of occupancy issued by your local building department and <input type="checkbox"/> Be inspected by the state fire marshal.</p> <p>You are responsible for complying with any local building ordinances. Local officials are responsible for enforcing city ordinances and county codes, such as zoning and building regulations. Contact your local building jurisdiction to determine if local ordinances are different than our standards.</p> <p>If you encounter conflicts or differing interpretations, contact us immediately. We must notify the local planning office of your intent to operate a child care center within the local jurisdiction. Other state agencies such as Labor and Industries, the State Fire Marshall and the Department of Health have regulations that apply to child care centers. You are responsible to contact those agencies to obtain their regulations. The other agencies are responsible for monitoring and enforcing their regulations.</p>		
<p>WAC 170-295-0060; WAC 170-297-1250; WAC 170-297-1275; WAC 170-297-3200</p> <p>What the requirements for applying for a license to operate a child care center? The application package for licensure must include the following attachments:</p> <p><input type="checkbox"/> Floor Plan of the facility drawn to scale <input type="checkbox"/> A copy of your Health Care Plan reviewed and signed by an advisory physician, physician's assistant or registered nurse <input type="checkbox"/> A copy of your policies and procedures that you give to parents and <input type="checkbox"/> A copy of your occupancy permit</p> <p>You must submit your application ninety or more calendar days before the date:</p> <p><input type="checkbox"/> You expect to open your new center <input type="checkbox"/> You expect to relocate your center <input type="checkbox"/> You expect to change licensee, or <input type="checkbox"/> You expect a change in your license category</p> <p>DEL will not issue a license to you until the Health Specialist and the State Fire Marshal's Office have inspected and approved your center.</p>		
Licensee:	Phone:	Email:
Licensor:	Phone:	Email: