Iowa Department of Human Services

NOTICE OF ACTION

(For Child Care Centers)

Date:

Name of Center:

Address:

County: License ID:

This is to inform you that a: [ ] **FULL** [ ] **PROVISIONAL**

Certificate of License to operate a [ ] Preschool

[ ] Child Care Center

has been issued for the period from to .

The maximum number of children to be cared for in this facility is

_____

Director – Child Care

470-4243 (2/09)