NOVA SCOTIA

Agriculture

Child Care Facility Registration

& Food Establishment Permit Application (if applicable)

I (We) hereby apply to register a Child Care Facility with the Department of Agriculture, Food Protection and Enforcement Division, and provide the following information.

The information contained in this application may be subject to public release.

1 Give contact information *(This will be used as return mailing address information.)*

Reset 1

Contact/owner name: _____

Mailing address: _____ City/Town: _____ Prov.: _____ Postal code: _____

Telephone: _____ Cell: _____ Fax: _____

Email address: _____

2 Give facility details *(For more information on temporary events, please visit our website at www.novascotia.ca/agri/foodsafety)*

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Facility name: _____

Business address (Civic #): _____ Street: _____ Town: _____

Registered Business #: | | | | | | | | | | N | S | | | | | (required)

Start date: _____

(To register a business, please visit Service Nova Scotia at www.gov.ns.ca/snsmr/access/business/ready-register-business.asp)

Proposed Program:

- ☐ Full day (over lunch)
- ☐ Part day (not over lunch)
- ☐ Both full day and part day

Days of Operation		Age Range	Proposed # of Children
☐ Monday to Friday	☐ Thursday	Infants (0-17 months)	
☐ Monday	☐ Friday	Toddlers (18-36 months)	
☐ Tuesday	☐ Extended hours	Preschools (36 months – 5 years)	
☐ Wednesday	(Saturday, Sunday and evenings)	School age (5+)	
		Total number of children =	

3 Sign application

_____ Signature of Applicant

_____ Date

4 Return completed form to

Nova Scotia Department of Agriculture
Agriculture and Food Operations:

Food Protection and Enforcement
PO Box 890 (Harlow Institute)
Truro, NS B2N 5G6

Questions? Call toll-free 855-893-5309 or
902-893-5311(Truro) • Fax: 902-896-2381

PLEASE NOTE: In the event of owner change or business location change this permit is not transferable and a new permit must be applied for.

March 2013