CHILD CARE CENTER RENEWAL INFORMATION

If you have not done so already, you must print or save this file for your records. You must also submit the on-line application and remit payment for the application fee through Michigan Business One Stop.

You are required to complete and submit the documents listed in the Application Materials section below to the address listed for your county on the contact list at www.michigan.gov/michildcare > How Do I? > Contact My Consultant.

Application Materials
Forms listed below that are not included in this file are available on the licensing website at www.michigan.gov/michildcare-forms.

- ☐ Child Care Application (BCAL-3970).
- ☐ Supplemental Information Child Care Center (BCAL-3601).
- ☐ Licensing Record Clearance (BCAL-1326-CC). Review the BCAL-1326-CC instructions for fingerprinting. Fingerprinting must be completed for each partner, licensee designee, and program director, **if not previously completed**.
- ☐ Child Care Licensee Designee (BCAL-5003), if applicable and if not previously completed.
- ☐ Staffing Plan (BCAL-5001).
- ☐ No change in Building Construction Declaration (BCAL-2129), if applicable.
- ☐ Lead Hazard Risk Assessment Summary (BCAL-4344), if applicable.
- ☐ Self-Certification of Transportation Rules (BCAL-5044), if transportation is provided. **Note:** This form is not required if transportation is provided in a school bus by a school. [R400.8710].
- ☐ Inspection of fuel-fired furnace by a licensed heating contractor.
- ☐ Inspection of fuel-fired water heater by a licensed heating contractor or licensed plumbing contractor.
- ☐ Annual Documentation of Compliance for School-Age Programs Exempt from Inspection & On-Site Visits, if applicable.

If your program **is located** in a school building, please complete the attached School-Building Fire Inspection Certification (BCAL-5043).

If your program **is not located** in a school building, you will need to do one of the following:

- Request a fire safety inspection of your facility if it has been more than four years since the last fire safety inspection. A list of Qualified Fire Inspectors is online at: www.michigan.gov/michildcare > Licensed Providers > Inspections for Child Care Centers. Fees charged by the Qualified Fire Inspector are your responsibility. **The report will be forwarded by the Qualified Fire Inspector to your local Bureau of Community and Health System.**
- Complete the No Change in Building Construction Declaration (BCAL-2129) form if there has not been any new construction, remodeling, additions or renovations made to the center since the most recent fire safety inspection. **Note:** If there has been any new construction, remodeling, additions or renovations, you must obtain a fire safety inspection.

You will need to request an Environmental Health Inspection **ONLY** if you have any of the following:

- You have private well water and/or septic system.
- You provide food service.

You must use the enclosed Environmental Health Inspection Request (BCAL-1787) to arrange this inspection through your local health authority. **The report is to be forwarded, when complete, to your local Bureau of Community and Health System.** The inspection will be at your expense.

Centers licensed before December 7, 2006 located in a building constructed prior to 1978 have until January 2, 2017 to obtain a lead hazard risk assessment. The Lead Hazard Risk Assessment Summary (BCAL-4344) form must be included with the lead hazard risk assessment to document compliance with this rule. The lead hazard risk assessment must be conducted by a certified risk assessor. For more information and a list of certified lead risk assessors go to www.michigan.gov/michildcare > Licensed Providers > Inspections for Child Care Centers.

Note: Centers that operate in school buildings serving **only** school-age children are exempt from this requirement.

CHILD CENTERS	RENEWAL FEE
1 – 20 Children	$75.00
21 – 50 Children	$100.00
51 – 100 Children	$125.00
101+ Children	$150.00

☐ **FAMILY - 6 or less**

☐ **GROUP - 7 to 12**

☒ **CENTER**

CHILD CARE APPLICATION

Michigan Department of Licensing and Regulatory Affairs
Bureau of Community and Health Systems

FOR LICENSING USE ONLY – Cashier Code:
License Number : DC410340518
Paid Amount :
Cashier:

LICENSING USE ONLY

☐ Original ☒ Renewal ☐ Other

COMPLETE FOR ALL APPLICANTS

Check boxes to confirm statements have been read:

☒ I have reviewed the Child Care Organizations Act (1973 PA 116) and the licensing rules for the operation of the child care organization indicated above, and if granted a license, I agree to comply with the Act and Rules.

☒ In order to permit a proper determination of conformity with the Act and Rules, I give permission to the Michigan Department of Licensing and Regulatory Affairs to make a necessary and reasonable investigation of activities and standards of care and to make an on-site inspection of my facility and services

☒ I agree not to care for more children at one time than my licensed capacity states.

☒ I am aware of the legal provision that to operate a child care organization without a license constitutes a misdemeanor as stated in 1973 PA 116, Section 15.

☒ I certify that any information I give in respect to the Department's investigation will be, to the best of my ability, true and correct.

☒ I give permission to the Michigan Department of Licensing and Regulatory Affairs to contact persons, including those I give as references, in order to determine if I am in compliance with the Act and the Rules.

COMPLETE FOR CHILD CARE CENTER ONLY

Facility Name			Corporate Name/Sponsoring Organization Name		
Kent ISD - Comstock Park GSRP			Kent Intermediate School District		
Address (Street Number and Name)			Address (Street Number and Name)		
3825 Oakridge NW			864 Crahen Ave		
City	State	Zip Code	City	State	Zip Code
Comstock Park	MI	49321	Grand Rapids	MI	49525
Telephone Number	County		Telephone Number	County	
(616) 365-2329	Kent		(616) 365-2303		
Applicant's E-mail Address			Sponsoring Organization's E-mail Address		
julieguenther@kentisd.org			julieguenther@kentisd.org		

License Type:
☐ Corporation ☐ LLC ☐ Partnership
☒ Government Agency ☐ Organization ☐ Sole Proprietorship

Federal ID Number: [redacted]

Send Mail To:
☐ Facility
☒ Licensee

Corporate Status(Check One)
☒ None
☐ Profit
☐ Non-Profit

Applicant/Representative Signature (If Corporation, Must Be Signed By Authorized Person.)	Title	Date
Julie Guenther	GSRP Supervisor	10-10-22

LARA is an equal opportunity employer/program.

AUTHORITY:1973 PA 116
COMPLETION:Required
PENALTY:No registration/ approval/ license will be issued.

SUPPLEMENTAL INFORMATION CHILD CARE CENTER

Michigan Department of Human Services
Bureau of Children and Adult Licensing

☐ **ORIGINAL**

☒ **RENEWAL**

Center Namee:		LICENSE NUMBER REQUIRED FOR RENEWAL ONLY
Kent ISD - Comstock Park GSRP		
County:	Today's Date:	DC410340518
Kent	8/17/2022	

Applicant's Name (Individual Sponsoring Organizations)

ORGANIZATIONS WITH BOARD OF DIRECTORS

Chairperson/President's Name	Telephone Number	Work Telephone Number	
Home Address (Street Number and Name)	City	State	Zip Code

CENTER PROGRAM DIRECTOR

NOTIFY THIS OFFICE OF ANY CHANGES OF BOARO MEMBERS OR PROGRAM DIRECTOR.

LICENSE TERMS

Does the Center have : (Check One)			Child Capacity Requested:	18	Age Range (Indicate all appicable)
Water:	☒ Public	☐ Private	Year the Facility was Built:	1957	☒ 3 yr(s) 6 mo(s) TO 5 yr(s) 11 mon(s)
Sewage:	☒ Public	☐ Private			

PROGRAM INFORMATION

Operation Type (Check all applicable):		Days and Time of Operation (indicate a.m./p.m.):	
☐ Full Day	Not Available	Monday	From 08:30AM To 03:30PM
☒ Part Day	From SEP To MAY	Tuesday	From 08:30AM To 03:30PM
☐ Before School	Not Available	Wednesday	From 08:30AM To 03:30PM
☐ After School	Not Available	Thursday	From 08:30AM To 03:30PM
☐ Evening	Not Available	Friday	Not Open
☐ Overnight	Not Available	Saturday	Not Open
☐ Seasonal	Not Available	Sunday	Not Open

Additional Program Components (Check all applicable)

- ☐ FOOD SERVICE
- ☐ MIGRANT
- ☒ PRESCHOOL
- ☐ SCHOOL AGE
- ☐ TRANSPORTATION
- ☐ SWIMMING
- ☐ INFANTS/TODDLER
- ☒ GSRP

DIRECTIONS TO CENTER

(Indicate nearest intersection)

AUTHORITY:1973 PA 116

COMPLETION:Required

CONSEQUENCE FOR NONCOMPLETION: Applicant cannot be licensed.

Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

REQUEST OF CHILD CARE FORMS
Michigan Department of Licensing and Regulatory Affairs
Child Care Licensing Division

MAIL REQUEST TO:	MAIL FORMS TO: (LICENSEE)	
Department of Licensing and Regulatory Affairs Child Care Licensing Division 611 W. Ottawa P.O. Box 30664 Lansing, MI 48909-8164 Fax (517) 284-9709	Name: Kent Intermediate School District	
	Facility Name: Kent ISD - Comstock Park GSRP	
	Street Address: 864 Crahen Ave	
	City/State/Zip: Grand Rapids, MI, 49525	
	License #: DC410340518	Capacity: 18
	Phone #: (616)365-2303	

All forms and publications may be **downloaded and printed** from our Web site:
www.michigan.gov/michildcare.
All licensing forms and publications may be reproduced.

FAMILY AND GROUP CARE HOMES

NAME OF FORM	FORM #	QUANTITY
Child Information Record	BCAL-3731	
Child In Care Statement/Receipt	BCAL-3900	
Licensing Rules for Family and Group Care Homes	BCAL PUB 724	

CHILD CARE CENTER

NAME OF FORM	FORM #	QUANTITY
Child Information Record	BCAL-3731	
Licensing Rules for Child Care Centers	BCAL PUB 8	

Health Appraisal [children] (MDHHS/BCAL-3305) - This form can only be downloaded and printed from our Web site or ordered from the Department of Health and Human Services, via fax at **517-335-9855**.

Environmental Health Inspections

Please read this before proceeding any further

You must use the enclosed Environmental Health Inspection Request (BCAL-1787-CC) to arrange this inspection through your local health authority.

In order to determine which health inspection agency you will need to send the Environmental Health Inspection Request (BCAL-1787-CC) to, please go to www.michigan.gov/mdhhs > Inside DHHS > County Offices > Local Health Departments and click on the county in which your center is located. Fill in section 6 on the Environmental Health Inspection Request (BCAL-1787-CC) with the name and address of the health inspection agency.

This inspection will be at your expense. Contact your local health authority to verify the cost of the inspection.

If you have additional questions about the need to request a health inspection, please contact your local health department or call 866-685-0006.

Plan Reviews for a Child Care Center:

A child care center applicant/licensee considering new construction, renovation or structural modification of the kitchen, bathroom or food preparation or food storage area must contact the local environmental authority using the BCAL-1787-CC to assure compliance with all local regulations. If the local environmental health authority will not do a plan review, the applicant/licensee must provide documentation to Child Care Licensing.

ENVIRONMENTAL HEALTH INSPECTION REQUEST

Michigan Department of Licensing and Regulatory Affairs
Child Care Licensing

MOST LOCAL HEALTH DEPARTMENTS CHARGE AN INSPECTION FEE. YOU ARE ADVISED TO CONTACT THE LOCAL HEALTH DEPARTMENT TO DETERMINE THE FEE.

1. License Number: DC410340518
2. Expiration Date:
3. Status of License:
4. Proposed/Current Capacity: 18

6. Name and Address of Local Health Department

5. Please return the completed inspection report by this date

HEALTH DEPARTMENT TELEPHONE NUMBER

7. Reason for Inspection

- ☐ New Application
- ☐ Reinspection
- ☒ Renewal Inspection
- ☐ Complaint(Specify in No.24)
- ☐ Addition/Plan Review
- ☐ Proposed New Construction/ Plan Review
- ☐ Other(Specify in No.24)

8. Water Supply and/or Sewage Disposal and General Sanitation and Safety (Use BCAL-1788-CC)

- ☐ Children's Camp or Adult Foster Care Camp
- ☐ Child Care Center
- ☐ Special Request (explain in No. 24)

9. Return Completed Inspection Report to Your Licensing Consultant.
Go to www.michigan.gov/michildcare>How Do I?>Contact My Consultant for your consultant's address.

10. Name of Licensing Worker

Telephone Number

11. Address of Licensing Worker/Consultant (Number, Street)

City , Zip Code

12. Name of Facility: Kent ISD - Comstock Park GSRP

13. Name of Administrator/Contact Person

14. Address of Facility (Number , Street): 3825 Oakridge NW

15. City: Comstock Park

16. Township:

17. County: Kent

18. Zip Code: 49321

19. Facility Telephone Number: (616)365-2329

20. Alternate Telephone Number:

21. Date of Last Environmental Health Inspection

22. Directions to Facility From Nearest Major Intersection

23. Comments

24. To be completed by license applicant/licensee:

I request the health authority to conduct an environmental health inspection that is in accordance with the Sanitarians' Field Manual for Environmental Health Inspections of Facilities Licensed by the State of Michigan Department of Licensing and Regulatory Affairs of the facility indicated in box 13 of this document.

Julie Guenther — Signed

10-10-22 — Date

25. L.H.D. Use

Fee Amount $ _____ Payment made by check (#_____), cash, other_____

Received by _____ Date _____

LARA is an equal opportunity employer/program.
Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

AUTHORITY: 1973 PA 116
COMPLETION: Required.
NON-COMPLETION: No registration/license will be issued.

BCAL-1787-CC (6-15) MS Word