

# FAMILY AND GROUP HOME INCREASED CAPACITY ADDENDUM

## STATE OF MICHIGAN

Department of Licensing and Regulatory Affairs

Child Care Licensing Bureau

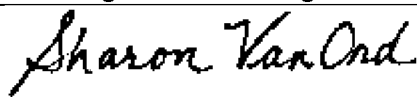
Licensee Name(s): Tami Nelson	License Number: DF190027640	Date: 06/14/2023
Name of Facility: Tami Nelson	Phone Number: 989-224-9295	
Address, City, State and Zip Code of Facility: 507 W. Gibbs St. Johns, MI 48879		

### Increased capacity:

(Check only one box.)

The licensed family child care home's capacity has been increased from 6 unrelated children to 7 unrelated children.

The licensed group child care home's capacity has been increased from 12 unrelated children to 14 unrelated children.

FOR INTERNAL USE ONLY		
This form serves as the addendum to the original licensing study report. The capacity increase has been approved.		
Licensing Consultant's Name	Licensing Consultant's Signature	Date
Sharon VanOrd		07/26/2023