



CITY OF FRUITA
CHILD CARE BUSINESS LICENSE ATTACHMENT

Please complete the form below and return with your business license application or business license renewal form to the City of Fruita at 325 E Aspen, Fruita, Co 81521, Attn: Deputy City Clerk.

Business Name:	
Mailing Address:	
City, State, Zip	
Phone #	
Owner's Name:	
Owner's Address:	
City, State, Zip	

*Please note that you may be contacted by a Building Official to coordinate an inspection of the premises to help ensure compliance with the local building code and other regulations.

1. Are you currently licensed as a child care provider with the State of Colorado Department of Human Services? (please check one): Yes No

2. How many children (including your own) under the age of 13 do you care for at maximum capacity? _____ How many of these are under 2 ½ years old?

3. How many children total are enrolled at your facility? _____

4. How many of the total children in your care are related to the head of the household?

City of Fruita Office Use Only

Date Received	Approved <input type="checkbox"/> Denied <input type="checkbox"/>
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Code Enforcement Signature: _____