



Louisville Metro Planning & Design Services HOME BUSINESS SUBMITTAL REQUIREMENTS

DATE RECEIVED
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JERRY E. ABRAMSON
MAYOR

CHARLES C. CASH, JR.,
DIRECTOR

For Staff Use Only
Date: _____ **Staff:** _____ **Case #:** _____

4.3.9 In-Home Day Care

The occupant of a single-family dwelling may provide day care services for no more than (6) six individuals at one time provided by the occupant of a single family residence and in accordance with the following standards:

- A. Associated outdoor activity other than pick-up and drop-off of children shall be prohibited between 9 P.M. and 7 A.M.
- B. Home Occupation Registration shall be completed and filed with the Department of Planning and Design Services.
- C. One non-resident employee is permitted.
- D. In-home day care facilities serving between four and six children shall be certified by the Cabinet for Health and Families Services (CHFS). Proof of certification shall be submitted at time of Home Occupation registration.

All Submittals for In-Home Day Care Must Be Submitted In Person To The Customer Service Counter

Name of Business _____

Louisville Metro Revenue Account Number* _____

(* The Metro Revenue Account Number is obtained from the Louisville Metro Revenue Commission at 617 W Jefferson St, 574-4900.)

Address: _____ Zip Code _____

Type of Home Business: _____

Number of Customers/Clients/Pupils on site at the same time: _____

Number of Employees living on site: _____ Number of Employees not living on site: _____

Hours of operation: (Days of the week) _____

Time from _____ to _____

Louisville Metro Planning & Design Services
444 South Fifth St.
Louisville, KY 40202

502-574-6230

Fax 502-574-8129



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Has the Applicant received a copy of the In Home Daycare regulations? Check one: Yes ___ No ___

I, _____, certify that I have read and understand the Louisville Metro In Home Daycare requirements and I am in complete compliance of same.

I declare that I have read the foregoing In Home Daycare Registration Application and that the facts stated in it are true.

APPLICANT: Print Name _____

Signature _____

Date _____ Telephone # _____

FOR THE PROPERTY OWNER: I hereby swear I am the lawful owner of the said property. I understand that the above person (applicant) is seeking to register a In Home Daycare at my property for the purpose of conducting the stated business and hereby consent to the same. I covenant that all Louisville Metro requirements for the property will be met. I agree to permit Louisville Metro Inspectors to make reasonable inspections of the property as necessary.

PROPERTY OWNER:

Print Name _____

Signature _____

Address _____

Date _____ Telephone # _____

Please Note: Applicant is responsible for updating this registration form, if operation changes.

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