

## Mower County Child Care Loan Program Application

**NOTE: Please read attached program criteria carefully before completing the application**

Business Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Business Owner(s): \_\_\_\_\_

Property Owner(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### EXPENSE DESCRIPTION

**Please provide an accurate and thorough list of your expenses.**

**Check each item planned for purchase and the total dollar amount planned.**

| ✓ | Item                                      | Quantity | Total |
|---|---|----------|-------|
|   | Licensing fee (\$150)                     |          |       |
|   | Background study fee (\$50 per person)    |          |       |
|   | Pre Licensing training (\$175/per person) |          |       |
|   | Ongoing training (\$250/per person)       |          |       |
|   | Fire Marshal visit, if needed (\$50)      |          |       |
|   | Smoke Detectors (\$25/each)               |          |       |
|   | Carbon monoxide detector (\$50)           |          |       |
|   | Fire extinguishers (\$35)                 |          |       |
|   | Outlet plugs (\$4)                        |          |       |
|   | Stationary baby gate (\$60)               |          |       |
|   | First aid kits (\$15)                     |          |       |
|   | Utensils/plates/cups (\$30)               |          |       |
|   | Pack n Play (\$120)                       |          |       |
|   | Pack n Play sheet (\$10)                  |          |       |
|   | Cots (\$120)                              |          |       |
|   | High chair/booster seat (\$75)            |          |       |

|  |   |  |  |
|--|---|--|--|
|  | Fluid Cleanup kit (\$15)                      |  |  |
|  | Potty seat/chair (\$20)                       |  |  |
|  | Monitor (\$40)                                |  |  |
|  | Toys for each age group (\$200 per age group) |  |  |
|  | Craft supplies (\$200)                        |  |  |
|  | Strollers (\$100)                             |  |  |
|  | Structural Improvements                       |  |  |
|  | <b>Total</b>                                  |  |  |

**Loan Disbursement**

Awarded loan funds will be dispersed to the child care provider upon submittal of receipts or invoices for supplies purchased and inspection of said receipts by the HRA Director.

I/We understand that any intentional misstatements will be grounds for disqualification.

The information on this application is accurate. I have read, understand, and agree to comply with the program criteria for the Mower County Child Care Loan Program.

Provider: \_\_\_\_\_

Date: \_\_\_\_\_

**Mail or Deliver to:**

**Austin HRA  
308 2nd Ave NE  
Austin, MN 55912**

\_\_\_\_\_  
Austin HRA

\_\_\_\_\_  
Mower County Licensor