Approval must be obtained for poisonous plants to be inside or outside the facility in areas accessible to children. This form can be used, or you can submit your own written plan for the protection of children from poisonous plants to the Child Care Licensing Program for approval.

Name of Facility:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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| --- | --- | --- |
| **I am requesting the following poisonous or questionable plants to be in my home/center or on the premises (e.g. philodendron)**  | **Specific location of each plant desired (e.g. master bedroom; fireplace mantel; kitchen shelf; west side of play yard)** | **How I will protect the children from this plant (e.g., access to the chokencherry tree and its droppings will be fenced off)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

(Attach additional forms if needed.)

This information I listed is based on my knowledge and/or research of common plants. I understand that if I add plants, I must complete a new form.

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Administrator’s Signature Date