

Name of Child

Signature of Owner or Primary Tenant:



Date:

## Identification and Residency Verification for Informal Child Care Providers

All informal child care providers (also known as legally exempt family and in-home child care providers) must provide proof of identification and residency in order to enroll with ACS and receive payment. Please submit this form for every new child that you enroll. Name of Provider: Name of Child in Care: \_\_\_ Location of Child Care: This Location Is (Select One): O My Home The Child's Home O Neither **Verification of Provider Identity** Please submit **one** of the following valid forms of photo identification: Please submit **two** of the following valid forms of non-O Driver's license/non-drivers identification card photo identification: O Passport or visa □ Social Security card O Naturalization or citizenship certificate ☐ Birth certificate [ OR ] School or Military ID card Baptismal certificate Employment Authorization card Government Benefit Card (e.g. Cash O Permanent Resident card Assistance, Medicaid, SNAP) ☐ Life Insurance Policy ☐ Bank Statement Verification of Residency Informal Child Care Providers may provide care for a child in their home, in the home of the child, or in a home where neither the provider nor the child lives. In all of these circumstances, verification of the residency is required. If You Are Providing Care in Your Home Please submit one of the following forms of documentation (either the original or a copy). Documents with a \* cannot be more than 60 days old. Lease or deed with your name ☐ Mortgage records Property Tax Bill Utility bill with your address (e.g. electricity, gas, heating, oil, water or landline phone) Rent statement/receipt with preprinted address\* □ A bank statement with your address\* ☐ Provider's school records indicating your address\* Statement from landlord on his/her official stationery\* If You Are Providing Care in the Child's Home or in Another Home Please have the owner or primary tenant where care is being provided sign the statement below. Additional documentation is not required. \_\_\_\_, the owner or primary tenant at \_\_\_ Name of owner/primary tenant approve the use of my residence for child care provided by  $\frac{}{}$  Name of provider