



Health and Social Development Department

Health Services Division

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Application for Health Certificate for Child Care Services: By-law Notice 433 of 26 May 2004 (Art 4)

By-law available on www.tshwane.gov.za (By-laws promulgated)

Office: 012 358 4656 E-mail: ehonestop@tshwane.gov.za
 Fax: 012 358 8674 Postal: PO Box 234, Pretoria, 0001

Name of Applicant: _____

Trading as: _____

Address of premises: _____

Contact Number(s): _____

		Yes	No
Type of child care facility:	Crèche or full day care		
	Morning care centre		
	Pre-primary school		
	After school Centre		
Are meals provided?			
Is a kitchen provided?			
Is a sickbay provided?			
Is a first aid kit available?			
Does at least one staff member have a valid first aid certificate?			
Are sandpits provided?			
Has application been made with the Gauteng Department of Social Development?			
Has application been made with the Gauteng Department of Education for Registration in terms of the Schools Act? (Applicable to pre-school and schools-based after care facilities.			
Are all the following documents available:	Journal		
	Medical Report		
	Attendance Register		
Has staff undergone pre-employment chest X-rays detection of TB?			

Number of children and age group?	Age Group	Number of Children
	0 – 3 years	
	3 – 6 years	
	6 years and above	
Operating hours: _____		

Type of toilets available:	Potties	Flush	Chemical	Pit	Buckets
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	Crèche or Day Care Centre		Morning Care	After Care
	Under 2 years	2 to 6 years	3 to 6 years	School-going age
Indoor play space m ²				
Outdoor play space m ²				
Number of toilets				
Number of hand-wash basins				
Number of potties				

Note:

1. A detailed layout plan, on scale 1:100 with dimensions of the premises, indicating the amount of class-rooms, their sizes, the detail of separate sanitation facilities, play grounds provided and their sizes and any other applicable information, must be submitted with this application.
2. The applicant is advised to consult with the following Departments:
 - a) Metro Police
 - b) Town Planning: Land-use Rights
 - c) Community Safety: Fire Safety
 - d) Building control

Signature Applicant_____

Date_____