North Carolina Department of Health and Human Services Division of Child and Family Well-Being, Community Nutrition Services Section Child and Adult Care Food Program Sponsoring Organizations of Unaffiliated Centers Application Process Checklist for Adding New Providers/Centers



Institution Name	Agreement Number	
Name of New Day Care Home Provider:		
Name of New Sponsored Center:		

Check (\checkmark) each item after completion in the <u>first column</u>. Failure to accurately complete all required documents and submit the required number of documents requested may delay program approval.

Day Care Home Provider Forms	Institution Use	CACFP Regional Consultant Use	CACFP Use
Facility Pre-Qualification Application			
Agreement CAC 8D			
Attachment F – Contractor's Certification			
Certification of Single Exclusive CACFP Agreement-Facility			
Information on Owners/Principals-Facility			
License or Letter of Operation			
*If the provider's name is not listed on the license, provide documentation from The Department of the Secretary of State			
Provider Application CAC 8B (Enter information in the Facility Dashboard)			
Sponsored Center			
Facility Pre-Qualification Application			
Center Application CAC-7			
Agreement CAC 8C			
Attachment A – General Terms and Conditions			
Attachment B – Certifications			
Attachment D – State Grant Certification, No Overdue Tax Debts			
Attachment D – State Grant Certification – For Individual Sub Grantees			
Attachment E – Conflict of Interest			
Conflict of Interest Policy			
Attachment F – Contractor's Certification			
Certification of Single Exclusive CACFP Agreement – Facility			
Information on Owners/Principals - Facility			
License			
Current Sanitation Report OR Pre-Operational Visit Form			
AT-RISK/OUTSIDE SCHOOL HOURS/EMERGENCY SHELTERS ONLY			
 State or Local Health/Safety Inspection OR Current Occupancy Permit 			
Participant's Eligibility Information for New Centers Summary Form			
Sponsored Centers Budget CAC 9A			
Non-Profit – IRS Letter 501 (c)(3)			
For Profit – Certification of Eligibility For-Profit CAC 1C			
Submit the following forms ONLY if you will be receiving catered meals.			
Food Service Management Contract (CAC 17)			
Attachment A – General Terms and Conditions			
Attachment B – Federal Certifications			
Total Amount: \$			
Food Service Contract Public Schools (CAC 16)			
Attachment A – General Terms and Conditions			
Attachment B – Certifications			
Total Amount: \$			

FOR STATE USE ONLY – Approval Date:

Var Date.____