



**The City of
OKLAHOMA CITY**
Development Services Department
420 W. Main, 8th Floor, Oklahoma City, Ok 73102
Affidavit

State of _____ }

County of _____ }

I, _____ of _____,
Applicant Applicant's Address

Owner of _____
Name of Daycare/Nursey/Day Camp & Address

Attest that all Oklahoma Department of Human Services requirements have been submitted and approved for a daycare license/day camp/nursey.

Being first duly sworn, deposes and says UNDER PENALTY of PERJURY that the statements contained herein are true and correct ANY FALSE OR DISHONEST ANSWER TO ANY QUESTION IN THIS FORM MAY BE GROUNDS FOR DENIAL, OR SUBSEQUENT REVOCATION OR SUSPENSION OF LICENSE.

Applicant's Name:(Printed) _____

Applicant's Signature: _____ Date _____

For Notary Only:

Subscribed and sworn to or affirmed before me by _____

this _____ day of _____, 20_____.

Notary Public

My Commission Expires: _____

My Commission Number: _____