

Date:

Sir/Madam,

Application for Health Clearance

I, Mr/Mrs..... (*Name of manager or owner*)
holder of National Identity Card (NIC) No. residing at
.....(*Address*),
wish to apply for a Health Clearance for the Child Day Care Centre
..... (*Name of Child Day Care Centre*),
situated at (*Address of*
Child Day Care Centre).

2. Kindly find annexed the following documents:

- (i) Site plan/Location plan;
- (ii) Copy of NIC;
- (iii) Business Registration Number (BRN); and
- (iv) Certificate of incorporation (if applicable).

3. You may contact me on telephone number for any additional information that require.

Yours faithfully,

(Manager or owner of CDCC)