



Choose Safe Places for Early Care and Education

Planning. Guidance. Protection.



Dear New, Prospective or Recurring Child Care Licensee,

The Tennessee Department of Health would like to help assure that you, your staff, and the children in your facility are spending time in a facility that is safe and healthy.

Enclosed you will find a self-audit survey that will help us to identify potential environmental issues that could pose a problem to your facility. We will look at the information provided on the survey to find businesses that could pose a hazard through normal operation, such as nail salon or hobby shop. We will also look for former uses of the building that could have left chemical exposure hazards, such as a funeral home or dry cleaner.

Please complete the survey to the best of your ability and return to the Tennessee Safe Places for Early Care and Education Program using one of the following methods:

Email: ChooseSafePlaces.TN@tn.gov

or

Mail: Choose Safe Places, TDH
3rd Floor Andrew Johnson Tower
710 James Robertson Pkwy
Nashville, TN 37243

If you have questions about completing this survey, please contact us at ChooseSafePlaces.TN@tn.gov or 615-741-7247.

We appreciate your time to complete the survey.

Rebecca Gorham
Tennessee Department of Health

Choose Safe Places

For Early Care and Education

Business Property Use Self-Audit Questions



The Tennessee Department of Health wants children to be safe and healthy enjoying their early care and education. Sometimes the past use of a site makes it a poor choice for children. Returning this questionnaire will allow us to look into the environmental history of the site where your child care business is located. This can protect the children, your employees, and your business investment. This questionnaire collects information about businesses currently located in the same building as your business. An adjacent business could release hazardous materials into the environment that could impact the health of children and employees at your early care and learning business. We are also asking for information about past uses for the property and buildings. Past uses such as manufacturing, industrial or agricultural could have left chemicals behind on the land or in the buildings. The information you provide will help the Tennessee Department of Health identify whether chemicals may be present at your early learning or day care property and will help the us ensure that the property safe.

Please answer the questions to the best of your ability going back in time as far as readily available information allows to search for the historical information requested. If, after a reasonable level of effort, you are not able to obtain information about the history of your property, you can check "unknown".

If you have questions about completing this survey, please contact the Tennessee Safe Places for Early Care and Education Program using one of the following methods:

Email: ChooseSafePlaces.TN@tn.gov

Phone: 615-741-7247: or

Mail: Choose Safe Places, TDH, 3rd Floor, 710 James Robertson Pkwy, Nashville, TN 37243

More information about our program can be found at tn.gov/ChooseSafePlaces. For answers to all other questions regarding day care licensing regulations, requirements and applications, call 800-462-8261 or <https://www.tn.gov/content/dam/tn/human-services/documents/child-adult-care-licensing-offices.pdf>.

GENERAL INFORMATION

Contact Name:	Person completing survey (if different)	Name:
Contact Phone #:		Phone #:
Name of Business:		
Business Address:		
Current Property Owner:		

ADJACENT BUSINESSES

1. Are any of the following businesses currently operating **in the same building/strip mall** as the early learning/day care business? Check box if "yes".

- | | |
|---|--|
| <input type="checkbox"/> Dry Cleaner | <input type="checkbox"/> Metal Plating |
| <input type="checkbox"/> Hair Salon/Nail Salon | <input type="checkbox"/> Gas Station |
| <input type="checkbox"/> Auto Repair/Auto Painting Shop | <input type="checkbox"/> Funeral Home |
| <input type="checkbox"/> Copy/Print Shop | <input type="checkbox"/> Hobby Shop |
| <input type="checkbox"/> Factory/Manufacturing/Industrial | <input type="checkbox"/> Unknown |

DRINKING WATER SOURCE

1. What is the source of the water at your business? Check appropriate box.

- Municipality
- Private well or spring
- Unknown

PROPERTY HISTORY QUESTIONS

1. In what year was the building constructed? _____

2. Was the land or building ever used in the past for any of the following? Check box if "yes".

- | | |
|---|--|
| <input type="checkbox"/> Dry Cleaner
<input type="checkbox"/> Gas Station
<input type="checkbox"/> Auto Repair/Auto Painting Shop
<input type="checkbox"/> Landfill/Dump
<input type="checkbox"/> Factory/Manufacturing/Industrial
<input type="checkbox"/> Funeral Home | <input type="checkbox"/> Metal Plating
<input type="checkbox"/> Shooting Range
<input type="checkbox"/> Farming/Agriculture
<input type="checkbox"/> Hair Salon/Nail Salon
<input type="checkbox"/> Other: _____
<input type="checkbox"/> Unknown |
|---|--|

3. For any boxes you checked above, please provide as much additional information as possible below. Attach additional pages if providing information for more than one type of past use.

Name of property owner: _____

Company/Business Name: _____

Owned/operated during what years? _____

Provide details about the business including a description of the operation if known.

4. Have any of the following documents ever been prepared for the property? Check box(es) if "yes".

- Environmental Site Assessment Unknown
- Participation in a State program such as the Voluntary Program or Brownfields Program

If "yes", are any documents/reports available?

- YES NO DON'T KNOW

5. Have you seen anything on your early learning or day care property that makes you think that hazardous chemicals could have been used there in the past? For example, metal drums, discarded car parts, construction debris, farm equipment, areas where grass does not grow, concrete or metal plate on the ground covering a hole?

- YES NO DON'T KNOW

If "yes", please provide further details. Include additional sheets if needed.

