



Choose Safe Places Minnesota Property Questionnaire

This voluntary questionnaire collects information about the current and former uses of your property and the properties nearby. Your responses will help the Minnesota Department of Health determine whether environmental contamination may be present at your property and provide guidance on actions to take (if necessary) to make sure the property is safe for children and staff. Please complete the questionnaire to the best of your ability.

1. Applicant Contact Information

Name _____

Phone _____

Email _____

Job Title/Role _____

2. Preferred contact method (choose one)

Phone

Email

3. Child Care Center Information

Address _____

Current property owner/contact info _____

Date building constructed _____

4. This child care center is: (choose one)

Not licensed/prospective

Licensed/active

5. Was the property ever used in the past for any of the following? (choose all that apply)

Dry cleaner

Auto repair shop

Gas station

Hair/Nail salon

Funeral home

Factory/Manufacturing/Industrial Use

Shooting range

Agriculture

Landfill

Other _____

None of the above

6. Are properties next door currently used for any of the following purposes? (choose all that apply)

- Dry cleaner
- Auto repair shop
- Gas station
- Hair/Nail salon
- Funeral home
- Factory/Manufacturing/Industrial Use
- Shooting range
- Agriculture
- Landfill
- Other _____
- None of the above

7. For any checked boxes, please share any known information (name of business, years of operation, type of manufacturing, etc.)

8. Is there anything else you think may be important for us to know about your location?

9. Where does your water come from? (choose one)

- Public water system – municipal
- Private well
- I don't know

10. Have any environmental assessments been prepared for the property? (choose one)

- Yes, Phase I/Phase II
- Yes, Other _____
- No
- I don't know

By submitting this property questionnaire, I acknowledge voluntary participation in the Choose Safe Places Minnesota Site Screening Program and acknowledge that I have read the Screening Limitations and Participation Disclaimer on the Site Screening Program website.

Minnesota Department of Health
Environmental Surveillance and Assessment Section
651-201-4501
www.health.state.mn.us

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To obtain this information in a different format, call: 651-201-4501. Printed on recycled paper.