

**SUPPLEMENT TO LICENSING DEFICIENCY REVIEW REQUEST**

Must be submitted within 7 business days from the date deficiency was cited

License # \_\_\_\_\_

Regulation # being disputed: (ex. 1711-ABDG) \_\_\_\_\_

Description of regulation: (ex. Child/staff ratio) \_\_\_\_\_

**(Copy of statement of deficiencies must be attached)**

(If disputing more than one deficiency, please use supplement to LDR request)

Explanation/basis of dispute:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach additional pages, if needed) Number of additional pages attached \_\_\_\_\_

Supporting documents attached (other than pages noted above) yes \_\_\_\_\_ no \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach additional pages, if needed) Number of additional pages attached \_\_\_\_\_

Supporting documents attached (other than pages noted above) yes \_\_\_\_\_ no \_\_\_\_\_

\_\_\_\_\_  
Printed name of individual submitting request

\_\_\_\_\_  
Signature of individual submitting request

\_\_\_\_\_  
Date