

## Application for Review of Net Average Annual Eligible Income

Regulation respecting the preventive withdrawal of certain home childcare providers (HCP) – section 19

**Reserved for the Ministère de la Famille**

Date of receipt (year-month-day):

### INSTRUCTIONS

- Complete one form for each revision request.
- Include all relevant documents supporting your application for review.
- Be sure to be able to demonstrate the date on which you received your calculation chart as established by your home childcare coordinating office.
- You are advised to keep a complete copy of your application for review and any other documents submitted.

### Section 1 – Information on the HCP

Surname:		Given name:	
Social insurance number:			
Address (number/apartment, street):			
City:		Province:	Postal code:
Identification number of HCP:			
Telephone:		Closing date of childcare service (year-month-day):	

### Section 2 – Information on your home childcare coordinating office (CO)

Name of CO:		Division number of the CO:	
Address of CO (number, street, city and postal code):			
Surname and given name of the person responsible at the CO:		Telephone:	Extension:

### Section 3 – Description of reasons for your application for review, pertinent facts and arguments (Please use an additional page if necessary.)

### Section 4 – Signature of the HCP

<hr style="border: none; border-top: 1px solid black;"/> Signature of the HCP	<hr style="border: none; border-top: 1px solid black;"/> Date (year-month-day)
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**Send to:**  
**Ministère de la Famille-DMO, Régime de retrait préventif de la RSG**  
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