



DANIEL P. McCOY  
County Executive

**DEPARTMENT OF HEALTH**  
COUNTY OF ALBANY  
175 GREEN STREET  
ALBANY, NEW YORK 12202

MARIBETH MILLER, BSN, MS  
Assistant Commissioner for Public Health

ELIZABETH F. WHALEN, MD, MPH  
Commissioner of Health

PATRICIA J. SNYDER, MBA  
Assistant Commissioner for Finance  
and Administration

*The Dr. John J.A. Lyons*  
ALBANY COUNTY HEALTH FACILITY  
(518) 447-4580 FAX (518) 447-4698  
[www.albanycounty.com](http://www.albanycounty.com)

TO: CHILD / DAYCARE OPERATORS

FROM: MARCIA M. LENEHAN, M.S., R.D., DIRECTOR  
DIVISION OF ENVIRONMENTAL HEALTH SERVICES

SUBJECT: CHILD / DAYCARE INSPECTIONS

Enclosed please find an Albany County Department of Health Child/Daycare Inspection Application form.

A fee of seventy-five (\$ 75.00) dollars is required and must accompany the completed application form.

Check or money order is to be made payable to: **Albany County Department of Health.**

If you have any questions, please contact Ms. Marianne P. Stone or me between 9:00a.m. - 4:30 p.m. below at:

DIVISION OF ENVIRONMENTAL HEALTH SERVICES: PHONE (518) 447-4625 FAX:  
(518) 447-4501

MML: MPS: mm  
Enclosure