

# Provider Report



Use this form to report changes to the Direct Pay Unit (DPU). Changes are required to be reported within five days of occurrence. Child care providers who are registered or certified with the Office of Child Care (OCC), need to report changes to both DPU and OCC. Contact OCC at 1-800-556-6616. Changes can be submitted to DPU by mail, telephone or email:

DPU P.O. Box 14850 Salem, Oregon 97309-0850
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**Telephone:**  
Salem 503-378-5500 or 1-800-699-9074  
Email: [Dpu.providerreporting@state.or.us](mailto:Dpu.providerreporting@state.or.us)

## 1. Date

Date when this change occurred or will occur: \_\_\_\_\_

## 2. Identifying information

Provider/facility name:	Telephone:	DHS provider number:	SSN or Tax ID number:
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## 3. New mailing address or telephone number

New mailing address:	City:	State:	ZIP code:	County:	Telephone:
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## 4. New address where you provide care or telephone number

New Address:	City:	State:	ZIP code:	County:	Telephone:
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## 5. My name has changed

Old name:	New name:
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## 6a. Someone age 16 years or older moved into my home or 6b. Someone visits my home during child care hours and may have unsupervised access to a child in care

Write that person's name below.

Name of person:	Date of birth:	Social Security number:
Name of person:	Date of birth:	Social Security number:

## 7. Other Changes

a.  I have been:

Arrested for a crime       Convicted of a crime

Involved with Child Protective Services (CPS, Child Welfare) for child abuse, child neglect, failure to protect a child or any other involvement (*including referral*):

Date occurred: \_\_\_\_\_

Law enforcement agency, court or CPS (Child Welfare) local branch office:  
\_\_\_\_\_

b.  Someone age 16 years or older living in or visiting my home has been:

Arrested for a crime

Convicted of a crime

Involved with CPS (Child Welfare) for child abuse, child neglect, failure to protect a child or any other involvement (*including referral*):

Date occurred: \_\_\_\_\_

Law enforcement agency, court or CPS (Child Welfare) local branch office:  
\_\_\_\_\_

If yes, list name(s) here (*first and last name*): \_\_\_\_\_