



**PRELIMINARY SERVICE PROVIDER INQUIRY
COVER PAGE**

Proposed Geographic Area: _____

Torrance/South Bay

Long Beach/Lakewood

Bellflower/Norwalk/Cerritos

Proposed/Current Agency Name: _____

Proposed Service Type and
Service Code: _____

Name of person or organization
submitting application: _____

Business physical address: _____

Mailing address,
if different from above: _____

Office telephone: _____

Cell Phone: _____

Primary E-mail address: _____

Title: _____

I am submitting a preliminary application and all required documents for a proposed service that is listed as an identified resource need on the HRC website. I verify that I have read all of the necessary Title 17 regulations related to this proposed service and I or my organization meets or exceeds the requirements set forth in those regulations.

Name: _____

Title Signature: _____

Date: _____