



JOE PARISI
DANE COUNTY EXECUTIVE

Dane County Department of Human Services

Division of Adult Community Services

Director – Astra Iheukumere
Division Administrator – Angela Velasquez

Dane County Children’s Long Term Support (CLTS)

Provider Information

Legal Name of Business (as shown on tax return):

Doing Business As (complete only if different from legal business name):

Provider NPI (National Provider Identifier is only needed for entities defined as a health care provider):

Billing Address (can be a PO box):

Address where services provided, if different from billing address. (Cannot be a PO box):

Program Contact Name:

Program Contact’s Phone (including area code):

Program Contact’s Email:

Billing Contact Name (if different than Program Contact):

Billing Contact’s Phone (including area code):

Billing Contact’s Email:

Name of Person Authorized to sign contracts:

Title of person authorized to sign contracts:

Signature of Person Authorized to sign contracts:

Please send completed form and direct any questions to:
Ross Hazlewood CLTS Provider Network Specialist
hazlewood.ross@countyofdane.com