



LARGE FAMILY DAY CARE APPLICATION

Applicant (Please Print)		Zoning District:	
Telephone Number	Secondary Telephone Number		
Applicant Address	City	State	Zip
Applicant E-Mail Address			
Property Owner Name (See below for required signature)			
Telephone Number	Secondary Telephone Number		
Property Owner Address	City	State	Zip
Owner Signature		Date	
Daycare Facility Address (if different from Applicant Address):	City	State	Zip
PLEASE COMPLETE THE FOLLOWING QUESTIONS:			
Service is provided on the following days of the week (Please check all that apply):			
<input type="checkbox"/> SUNDAY <input type="checkbox"/> MONDAY <input type="checkbox"/> TUESDAY <input type="checkbox"/> WEDNESDAY <input type="checkbox"/> THURSDAY <input type="checkbox"/> FRIDAY <input type="checkbox"/> SATURDAY			
This Day Care facility serves 9 to 14 children? <input type="checkbox"/> YES <input type="checkbox"/> NO			
The normal hours of operation are from _____ a.m. until _____ p.m.			
This Day Care Facility employs _____ persons who are not residents at this address.			
On-site parking is available for _____ automobiles. Parking must be provided for each non-resident employee, plus one space for pickup/drop-off purposes, plus the two required spaces for the residence.			
Does a six-foot high solid wood fence surround all outdoor recreation activities? <input type="checkbox"/> YES <input type="checkbox"/> NO			
In addition to the above, please provide the following:			
1) Site Plan (8.5x11 inch paper) showing the major dimensions of the property, the approximate location of the residence and other structures on the lot, required parking, outdoor recreation areas, and six-foot screen fencing. 2) The filing fee is a "one time only" fee applicable to this day care owner at this location.			
OWNER/APPLICANT'S ACKNOWLEDGEMENT			
*Section 6.02.020 of the LDC requires Day Care Homes serving 9-14 children to be located a minimum of 300 feet from any other such facility, to provide one parking space per non-resident employee plus one space for pick-up/drop-off, and to surround all outdoor activity areas by a six-foot high solid wood fence. This application is true and correct to the best of my knowledge.			
X _____		DATE _____	
Property Owner/Applicant's Signature			
STAFF USE ONLY			
Is this facility located 300 feet from any other similar facility? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Does this facility provide the required parking? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Is the outdoor activity area surrounded by a six-foot high solid wood fence? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Application Number: ZUP		Date Received	
Fee Received:		Receipt No	
Planner/Permit Tech:	<input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions (see below) <input type="checkbox"/> Denied		
Conditions of Approval:			