



CITY OF CASHMERE

101 Woodring Street
Cashmere, WA 98815
Phone (509)782-3513 Fax (509)782-2840

Application Date _____
Receipt No. _____
Hearing Date _____
Hearing Notification _____

FEE: \$600.00

Application for Family Home Day Care-B, Day Care Centers & Preschools

Applicant Name _____

Address _____ Phone _____

Property Owner's Name _____

Address _____

Property Legal Description (may be attached) _____

Zoning _____ No. of children participating _____

Business type: _____ Proposed hours of operation _____

PLEASE SUBMIT THE FOLLOWING:

- ❖ Certificate of compliance signed by City of Cashmere Building/Fire Inspector.
- ❖ Structural plans for any construction associated with the business. (Building permit required)
- ❖ Photocopy of license issued by the Washington State Dept of Social & Health Services.
- ❖ Scaled drawing showing dimensions of property and buildings, fenced/screened play areas, and on-site vehicle turnaround.
- ❖ Business license application and appropriate fee.
- ❖ SEPA checklist and appropriate fee.
- ❖ Stamped, addressed #10 envelopes for property owners and tenants of all property within a radius of 350 feet of the business.

I have answered all questions to the best of my knowledge and understand that if not answered truthfully my permit, if granted, may be revoked. I understand that the fee is non-refundable.

Signature

Date

