Application Date	
Receipt No	
Hearing Date	
Hearing Notification	_



## **CITY OF CASHMERE**

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

## **APPLICATION FOR CONDITIONAL USE PERMIT**

FAMILY HOME DAYCARE - B, MINI DAYCARE, DAYCARE CENTERS AND PRESCHOOLS

FEE: \$500.00

**Date** 

Applicant Name:	Home Phone #:	
Email:	Cell #:	
Address of Business:		
Property Owner's Name:	Phone #:	
Address:		
Email Address:		
Chelan County Parcel #:		
Zoning:	Business Type:	
Proposed Hours of Operation:	Number of Children:	
SUBMIT THE FOLLOWING WITH APPLICAT	ION:	
<ul> <li>Certificate of compliance signed by City of Cashmere Building/Fire Inspector.</li> <li>Structural plans for any construction associated with the business. (Building permit required)</li> <li>Photocopy of license issued by the Washington State Dept of Social &amp; Health Services.</li> <li>Scaled drawing showing dimensions of property and buildings, fenced/screened play areas, and on-site vehicle turnaround.</li> <li>City of Cashmere Business license.</li> <li>SEPA checklist and appropriate fee.</li> </ul>		
Initial boxes as acceptance  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.		
I'm responsible for any other Direct Cost bille	d to the city.	

**Signature** 

## CITY OF CASHMERE 101 WOODRING STREET CASHMERE, WA 98815

## CERTIFICATE OF BUILDING AND FIRE CODE COMPLIANCE DAY CARE PROVIDER

This is to certify that the building proposed for a childcare facility located at		
meets the applicable building and fire code requirements for a family day care / preschool. specifically checked to ascertain that windows and doors meet the applicable codes.		
Cashmere Building/Fire Inspector	Date	
The following items shall be corrected before issuar	nce of license:	