



WASHOE COUNTY HUMAN SERVICES AGENCY

350 S. CENTER STREET
RENO, NEVADA 89501-2103
PHONE: (775) 337-4470
FAX: (775) 337-4495

ZONING OFFICE REPORT

_____/_____
Worker Area

Date: _____

PART I – To be completed by applicant and then taken to the local zoning office for Part II to be completed by a zoning officer. (In some cases, transactions by mail may be possible. Check with your local zoning office.)

The following applicant is applying to be licensed as a Child Care Center:

Name of Center (please print): _____
Street Address: _____
City: _____ State NV Zip Code: _____
Contact Name: _____ Phone Number: _____
Business Hours: _____
Capacity (number of children): _____ Number of Staff Required: _____
Age range of children: _____
Existing Building? Yes No
WCHSA Comments: _____

PART II - To be used by zoning office:

<input type="checkbox"/> CITY OF RENO , Community Development, Planning Division, Attn: Kyle Chisholm 1 East 1 st Street, 2 nd Floor, Reno, NV 89501	Phone: 321-8309 Fax: 334-2043
<input type="checkbox"/> CITY OF SPARKS , Community Development, 431 Prater Way, Sparks, NV 89431	Phone: 353-2340 Fax: 353-1635
<input type="checkbox"/> WASHOE COUNTY PLANNING , 1001 East Ninth Street, Reno, NV 89512	Phone: 328-6100 Fax: 328-6133

Please complete the following report:

Previous business license number (leave blank if not applicable): _____

Zoning requirements permit this applicant to provide child care to: _____ children.
number

Does care of more than this number of children require a special use permit or Admin permit? Yes No

Condition of Approval / Special Use Permit Exists. Please attach with approval.

Development standards, Parking (ADA), Lighting, Landscaping requirements have been met.

COMMENTS:

SIGNED: _____

DATE: _____

TITLE: _____

Return this completed form with your child care application.



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COMMUNICATION**



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350 S. CENTER STREET, RENO, NV 89501

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