



6000 Main St. SW, Lakewood, WA 98499
Phone: (253) 512-2261

COMMERCIAL/RESIDENTIAL DAYCARE APPLICATION

FEE: \$150.00 plus applicable building permit fees.

Pre-Application Fee (If required): \$150.00

DAYCARE CENTER. Any type of group daycare programs, for children or adults, including nursery schools for children under minimum age for education in public schools, parent cooperative nursery schools, playgroups for preschool children, covering afterschool care for school children, and programs which provide organized learning and education experiences, provided such establishments are licensed by the state and conducted in accordance with state requirements. For the purpose of this title the following shall also apply to daycare center, nursery schools or preschools. All subject to compliance with all appropriate federal, state and/or local licensing requirements and the specific standards set forth in LMC 18A.40.080, Health and Social Services.

SUBMITTAL REQUIREMENTS:

- ___ 1) **REQUIRED APPLICATION FORM.** The completed original application form, making sure that all of the required answers are provided and signatures have been obtained.
- ___ 2) **REQUIRED FEE.** Payment information will be sent once application is accepted.
- ___ 3) **ACCURATE SITE PLAN (DRAWN TO SCALE, 1" = 20').** A copy of a site plan, drawn to scale, including the following information:
 - Accurate location of property lines;
 - Footprint of existing and proposed structures;
 - Existing/ proposed parking areas - shown dimensions of parking area (parking stalls shall be minimum 9' wide by 18' long);
 - Existing/ proposed turnaround/ vehicle maneuvering areas;
 - Existing/ proposed driveway entrances;
 - Existing/ proposed safe passenger loading area (shall be a minimum 5' wide by 18' long);
 - Existing/ proposed fenced outdoor play areas/ play equipment;
 - Existing/ proposed accessory structures.
- ___ 4) **ACCURATE FLOOR PLAN DIAGRAMS (DRAWN TO SCALE, ¼" = 1').** A copy of a complete floor plan diagram, including the following information:
 - Floor plan of entire house (including all floors);
 - INDICATE all rooms within the house that will be used for daycare use;
 - Show all sleeping rooms (identified by number);
 - Show all dimensions (length and width) of windows, hallways, doors, exits, stairs, ramps, elevators and platform lifts;
 - Indicate the height of each window sill when measured from floor level;
 - Indicate the location of each smoke detector within each room. Indicate whether it is battery operated or hard-wired with battery back-up.

All above items must be submitted at the time of application in order for the application to be accepted as complete. Handouts and application forms may be revised without notice.

PRE-APPLICATION MAY BE REQUIRED. If required, submit pre-application materials as required on the pre-application form.



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SITE ADDRESS: _____

APPLICANT: (mandatory)

Name: _____ Daytime Phone: _____

Mailing Address: _____

Email Address: _____

Will the applicant be the contact person? YES or NO **If other, please specify below:**

Contact person: _____ Phone #: _____

Mailing Address: _____

Email Address: _____

PROPERTY OWNER/TENANT: (mandatory)

Name: _____ Daytime Phone: _____

Mailing Address: _____

PREVIOUS USE OF PROPERTY: _____

SURROUNDING USES AND BUSINESSES NEXT TO PROPOSED DAYCARE SITE:

ARE THERE ANY OTHER DAYCARE FACILITIES WITHIN 300 FEET OF YOUR PROPOSED LOCATION? IF SO, INDICATE THE ADDRESS WHERE THIS FACILITY IS LOCATED:

PROPOSED IMPROVEMENTS/ WORK DESCRIPTION:

WILL THIS FACILITY BE A HOME-BASED DAYCARE? _____

PROPOSED HOURS, DAYS, PLACE AND MANNER OF OPERATION:

PROPOSED # OF CHILDREN/STUDENTS: _____ PROPOSED # OF EMPLOYEES: _____

TRAFFIC (VEHICULAR TRIPS TO AND FROM SITE PER DAY) GENERATED BY THE USE, INCLUDING DELIVERIES AND CLIENT-RELATED TRIPS:

EXISTING # PARKING STALLS: _____ PROPOSED # PARKING STALLS: _____

WILL THE FACILITY HAVE AN OUTDOOR PLAY AREA? _____

DAYCARE FACILITIES ARE REQUIRED TO PROVIDE A SAFE PASSENGER LOADING AREA. WILL THE PROPOSED FACILITY BE ABLE TO ACCOMMODATE THIS REQUIREMENT?

WHAT ARE THE DIMENSIONS OF THE SAFE PASSENGER LOADING AREA?

WILL ANY STRUCTURAL OR DECORATIVE ALTERATIONS BE MADE TO THE BUILDING? IF SO, DESCRIBE:

WILL ANY SIGNAGE BE INSTALLED ON THE PROPERTY? IF SO, DESCRIBE:

AUTHORIZED AGENT/OWNER SIGNATURE:

By affixing my signature hereto, I certify under penalty of perjury that the information furnished herein is true and correct to the best of my knowledge and that I am the owner of the premises where the work is to be performed, or I am acting as the owner's authorized agent. I further agree to hold harmless the City of Lakewood as to any claim (including costs, expenses and attorney's fees incurred in investigation of such claim) which may be made by any person, including the undersigned, and filed against the City of Lakewood, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information provided to the City as part of this application.

Signature of Authorized Agent/Owner

Date

OFFICE USE ONLY:

APPLICATION #: _____ TAX PARCEL #: _____

APPLICATION NAME: _____

ZONE: _____ USE TYPE: _____

DATE APPLICATION RECEIVED: _____ RECEIVED BY: _____
