



# Home Occupation Daycare Conditional use permit application

## Fee \$250.00

**THIS APPLICATION MUST HAVE AN ON-SITE INSPECTION BEFORE IT IS ISSUED!**

### Property information and location (All lines applicable to this site must be filled in)

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

Parcel # \_\_\_\_\_ Lot # \_\_\_\_\_

Subdivision Name: \_\_\_\_\_

**You MUST include a parcel map obtained from the Tooele County Recorder's Office  
with this application!**

### Property Owner(s) Information

Name(s): \_\_\_\_\_

Address per tax rolls: \_\_\_\_\_

City/County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Office/home phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mobile phone: \_\_\_\_\_ Message phone: \_\_\_\_\_

Email address: \_\_\_\_\_

**A copy of the deed, offer or tax notice MUST be included to demonstrate ownership**

*(For Office Use Only)*

CUP #: \_\_\_\_\_ Fee \$ 250.00 Receipt #: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Is this an amendment?

Yes

No

## Agent for the Property Owner(s) Information

Name(s): \_\_\_\_\_

Address per tax rolls: \_\_\_\_\_

City/County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Office/home phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mobile phone: \_\_\_\_\_ Message phone: \_\_\_\_\_

Email address: \_\_\_\_\_

***A copy of the deed, offer or tax notice MUST be included to demonstrate ownership***

There shall be no presumption of approval of any aspect of the process.

**Each application for a conditional use permit shall have all required submittals before it is accepted as a complete application.**

GIVE DETAILS OF DAYCARE OPERATION (MAX # OF CHILDREN, HOURS, ETC):


Total acreage of parcel: \_\_\_\_\_ Area occupied by this use: \_\_\_\_\_

Current zoning designation: \_\_\_\_\_ Current use of land: \_\_\_\_\_

## Conditions Imposed:

In submitting this application, I (We) agree to the following conditions and understand that any breach of any one or more will cause this permit to become void:

1. No more than sixteen (16) children with up to eight (8) children per one (1) adult working at the day care, shall be permitted. This includes no more than two children under the age of two. The number of children in care includes the providers' own children under the age of four. Further guidelines for supervision and ratio are found in the State of Utah's residential certificate rules\*: Supervision and Ratios.
2. There shall be no more than one (1) adult employed by the day care facility who resides outside of the home:
3. The day care shall be licensed with the State of Utah, and will cease operation upon revocation, suspension or failure to renew license;
4. The inside and outside areas that are used for the day care shall be made to conform to the standards of the current and any future updates of the Uniform Building Code.
5. All child care activities shall take place at the home unless written consent by parent or guardian. All indoor and outdoor activities shall be in accordance with the State of Utah's Residential Certificate Rules\*: Indoor Environment, Outdoor Environment and Activities.
6. The hours of operation shall be no more than 6:00 a.m. to 9:00 p.m., Monday through Saturday with outside activities restricted to the hours of 9:00 a.m. to 4:00 p.m..
7. The child care facility shall comply with the requirements of the Tooele County Health Department, the Utah Department of Health and any other local health departments for child day care facilities.
8. Meals and treats shall be provided in accordance with the Tooele County Health Department Regulations and State of Utah's Residential Certificate Rules\*: Child Nutrition.
9. The employees of the Department of Engineering, Tooele County Health Department, Tooele County Sheriff's Department and the Utah Department of Health shall be permitted to inspect the day care facility during its hours of operation.

I (We) as the owner(s) of this property have read and do hereby agree to, and understand the above terms and conditions without reservation and place my signature below as a act of such agreement. It is further agreed and understood that should I (we) violate any of the above conditions, this permit shall become null and void without further process and such use will not be permitted upon the property for one year. This permit is issued site specific and not transferable to another property, but may be transferred to a new owner.

I (We) understand that the Zoning Administrator shall not authorize a conditional use permit unless the evidence presented is such as to establish that such use will not, under the circumstances of the particular case, be detrimental to the health, safety or general welfare of persons residing or working

in the vicinity and the proposed use will comply with regulations and conditions specified in the Tooele County Zoning Ordinance for such use.

Signature of owner(s) or agent(s):

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### **Application determination**

This application for a conditional use permit allowing a home occupation to be established at

Parcel # \_\_\_\_\_ , addressed: \_\_\_\_\_

is  approved  denied on

By \_\_\_\_\_