



CITY OF ROCK SPRINGS
FAMILY CHILD CARE HOME (FCCH)
CONDITIONAL USE PERMIT
APPLICATION

Planning & Zoning Division
212 D Street
Rock Springs WY 82901
307.352.1540 (phone)
307.352.1545 (fax)

City Use Only:

Date Received _____ File Number: _____
[] Approved [] Approved with Conditions [] Denied
[] Contact the Building Department at (307) 352-1540 for building permit submittal requirements.
[] _____
[] _____
[] _____
Date of Action: _____ By: _____

[] \$60.00 Application Fee

PROPERTY INFORMATION

PID: _____ - _____ - _____ - _____ - _____

Property Address: _____

Subdivision: _____ Block: _____ Lot: _____

Legal Description Quarter: _____ Section: _____ Township: _____ Range: _____

Zoning: _____ Overlay: _____ Floodplain Designation: _____

CONTACT INFORMATION

Petitioner: Name: _____ Phone: (____) _____
Company Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Email Address: _____

Property Owner: Name: _____ Phone: (____) _____
Company Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Email Address: _____

DEFINITIONS

The following definitions will assist you in completing this application. Please consider them carefully prior to submitting your request for Conditional Use Permit approval.

- [] Family Child Care Home (FCCH) – A licensed child care facility in which care is provided for no more than ten (10) children for part of a day in the primary residence of the provider.
[] Preschool – Pre-Kindergarten instruction provided for children aged 3 years to 5 years and normally conducted for a two-to-four-hour period of time (session), said instruction designed to be preparatory for Kindergarten. [Note: In the City of Rock Springs, preschools may be conducted in a Child Care Center (CCC), Family Child Care Center (FCCC), or Family Child Care Home (FCCH).]

PLEASE ANSWER THE FOLLOWING

Please be advised that your application will be reviewed based upon this submittal. Family Child Care Home (FCCH) Conditional Use Permits shall be restricted based upon the answers below, as well as the City's regulations. Should you want to increase the number of sessions, children, days, or hours of operation following approval, an amended application shall be required.

1. Proposed use is (*mark only one*):

Child Care Only Preschool Only Child Care / Preschool Combination

2. Maximum number of children to be cared for at any given time OR per preschool session: _____

3. If application includes a preschool, please complete the following (*otherwise, skip to question 4 below*):

a. Number of preschool sessions per day (*max. 2 allowed*): _____

b. Number of preschool sessions per week (*max. 6 allowed*): _____

c. If more than one session per day, list the separation time between sessions (*min. 1 hr. req.*): _____

d. Days and times of preschool sessions (*example: MWF, 9 a.m. - 11 a.m.*): _____

4. Days and hours of operation (*child care only*): _____

5. Parking and traffic circulation (number of available client parking spaces): _____

6. Is the property located on a cul de sac or court? Yes No

TYPE OF FAMILY CHILD CARE HOME (FCCH) REQUESTED

Please check the appropriate permit type below and include any additional information required based upon the type of permit requested.

Staff Level Review:

If **5 or fewer children** are proposed at any given time for child care OR per preschool session AND the property is NOT located on a cul de sac or court, the application may be reviewed at staff level. Please allow 5 business days following submission of a complete application for a staff determination.

Please note: Preschool sessions shall be limited to no more than two (2) per day and six (10) per week. Preschool sessions shall be separated by a minimum of one hour from the time one session ends and the next one begins.

Staff Level Review AND Neighborhood Notification:

If **6 to 8 children** are proposed at any given time for child care OR per preschool session OR **6 or fewer children** are proposed but the property is **located on a cul de sac or court**, the application may be reviewed at staff level with neighborhood notification. Please allow 5 business days following receipt of a complete application for neighborhood notification and an additional minimum of 10 calendar days for receipt of neighborhood responses. Should more than 50 percent of the adjoining property owners respond in opposition to the application within the 10 calendar day protest period, the application will be forwarded to the next available Planning & Zoning Commission meeting for consideration. In no case will an application be forwarded to the Planning and Zoning Commission less than 9 days prior to the regularly scheduled meeting. See "Submittal Deadlines" listed below for meeting schedule.

Please note: Preschool sessions shall be limited to no more than two (2) per day and six (10) per week. Preschool sessions shall be separated by a minimum of one hour from the time one session ends and the next one begins.

Planning and Zoning Commission Review with Neighborhood Notification:

If **9 or 10 children** are proposed at any given time for child care OR per preschool session, the application shall require review and approval by the Planning and Zoning Commission. Applications shall be submitted by the "Submittal Deadlines" listed below and will be forwarded to the next available Planning and Zoning Commission meeting.

Please note: Preschool sessions shall be limited to no more than two (2) per day and ten (10) per week. Preschool sessions shall be separated by a minimum of one hour from the time one session ends and the next one begins.

SUBMITTAL REQUIREMENTS

The following items are required for submitting a complete Family Child Care Home (FCCH) Conditional Use Permit Application and must be submitted in accordance with the submittal deadlines listed on this application. Applications submitted after the submittal deadlines, as listed, will be postponed until the following month. **An incomplete application will not be reviewed and will be returned to the petitioner.**

- Filing Fee - \$60.00
- Completed Family Child Care Home (FCCH) Conditional Use Permit Application.
- Local Zoning Approval Receipt Form signed by the Chief Building Inspector and the Rock Springs Fire Inspector.

NOTE: The Planning Department will sign the receipt after Staff level review **OR** after receiving approval by the Planning and Zoning Commission (*if required*). After all signatures are received, this form will be forwarded to the State of Wyoming to provide documentation of the City's approval.

SIGNATURE(S) REQUIRED

I acknowledge that I have read and understand this application and the pertinent Family Child Care Home (FCCH) Conditional Use Permit approval regulations of the City of Rock Springs. I further agree that if the permit is approved, I will comply with all pertinent regulations and conditions as set forth by the City of Rock Springs. I also certify that the information provided with this application is true and correct, and false or inaccurate information used by an applicant to secure compliance with the City's Zoning Ordinance shall be reason to deny or revoke any application or permit.

Signature of Applicant _____

Date _____

Signature of Property Owner _____

Date _____



City of Rock Springs, Wyoming

Department of Public Services
212 D Street, Rock Springs, WY 82901
Office [307] 352-1540 • FAX [307] 352-

*** Local Zoning Approval Receipt ***

APPLICANT:

Please complete the top portion of this form and have it available at the time of your Building and Fire inspections. You must contact the Chief Building Official and the Fire Inspector at the numbers provided to schedule your inspections. Once signed by the Chief Building Official AND the Fire Inspector, return this form to the City Planner's Office (address listed below). For questions regarding State of Wyoming approval, contact the Facility Licensing Officer, Department of Family Services, at (307) 362-5630.

Applicant's Name: _____

Child Care Facility Address: _____

Contact Phone Number: _____

CITY REPRESENTATIVES:

The above-listed provider wishes to have a child care license. The State of Wyoming must have approval from the City of Rock Springs to consider the request. As a City representative, please sign the following area that applies to you if the provider has satisfied your department's requests.

1) BUILDING:

Jeff Tuttle, Chief Building Official
212 'D' Street
Rock Springs, WY 82901
(307) 352-1540

(Signature of Approval) _____

(Date) _____

2) FIRE:

Rick Cozad, City Fire Inspector
2117 Hillcrest Drive
Rock Springs, WY 82901
(307) 352-1484

(Signature of Approval) _____

(Date) _____

3) ZONING:

City Planner
212 'D' Street
Rock Springs, WY 82901
(307) 352-1540

Planning & Zoning Commission Meeting Date

Max. # Children Permitted at Any Given Time

Max. # Employees Permitted at Any Given Time

(Signature of Approval) _____

(Date) _____

After all signatures are received, this form will be forwarded to the State of Wyoming to provide documentation of the City of Rock Springs approval.

STATE OF WYOMING:

Once signed by all representatives listed above, this form serves as the applicant's receipt of "Local Zoning Approval". If you have any questions regarding this approval, please contact the City Planner at the address and phone number listed above.