FAMILY DAY CARE HOME PERMIT
FILING FEE: $401.00
(NON-REFUNDABLE)

(Please Print)
Address of Family Day Care Home _____

Owner/Operator _____ Phone _____

A family day care home is a single family home which provides less-than-24-hour non-medical family day care and is licensed by the State Department of Social Services as a family day care home for up to 14 children in accordance with the provisions of Section 1597.465 of the State Health and Safety Code. Family day care homes are required to obtain a permit from the City of Vacaville pursuant to Chapter 14.09.121 of the Land Use and Development Code.

The following operational standards must be met in order to apply for a permit and operate a family day care home:

A. The use is clearly secondary to the use of a single family home for dwelling purposes.

B. The proposed facility is not within 200 feet of another approved family day care home.

C. The proposed facility has no more than three employees, including the primary operator of the family day care home, on duty at any one time.

D. The proposed facility will not result in excessive noise or vehicular traffic to the neighborhood in which the facility is located.

E. No signs, nameplates, or other advertising may be affixed to the premises.

F. The applicant must either possess or have applied for a family day care home license through the State Department of Social Services.

Reductions to the 200 foot separation standard may be granted by the Planning Commission after conducting a public hearing on the proposal. Additional operational standards will apply in this case.

OWNER/OPERATOR'S CERTIFICATE

(Please Print) I, _____, do hereby certify that I am the owner/operator of the subject family day care home in this application and that failure to comply with operational standards A through F or any other conditions of approval may be cause for revocation of this permit.

_____ _____ _____
Applicant's Signature Mailing Address Date

_____
Property Owner's Signature

FOR PLANNING DIVISION USE ONLY

File Number _____ APN _____

Date Received _____ Notices Mailed _____

Director Action: Date _____

☐ Approved ☐ Denied ☐ Referred to Planning Commission

Commission Action: Date _____

☐ Approved ☐ Denied