



# **BENTON COUNTY PLANNING DEPARTMENT**

## **INFORMATION FOR CHILD DAY CARE FACILITY TYPE A REGISTRATION**

This packet is designed to assist you in preparing your application for a Child Day Care Facility Type A Permit. Applications may be submitted to the Benton County Planning Department, P.O. Box 910, 1002 Dudley Avenue, Prosser WA 99350 between 8 a.m. and Noon and 1 p.m. and 5 p.m. or to the Benton County Building Department, 5600 W. Canal Drive, Kennewick WA 99336 between 9 a.m. and Noon and 1 p.m. and 5 p.m. Monday thru Friday.

Child Day Care Facility Type A means a dwelling unit where a childcare provider cares for twelve (12) or fewer children for period of less than 24 hours a day. If you wish to care for more than (12) children or conduct your Child Day Care in a building or structure other than a dwelling unit then you will need to apply for a Child Day Care Facility Type B through the Conditional Use Permit process, please contact the Planning Department for more information on this permitting process.

Please provide the following information at the time of submittal. If any of this information is not provided, we may not be able to process your application.

1. A completed application form and applicable non-refundable fee of \$120.00. Including a scaled drawing (*See attached sample*) showing in detail the location of any existing and proposed dwelling units, septic systems, easements, fences, signage, parking areas etc. **ALL persons with an ownership interest in the property on which the land use action is proposed must sign the application other than interests exclusively limited to ownership of the parcel's mineral rights.**
2. Additional information and/or permits may be required by other agencies such as, but not limited to; the Benton County Building Dept., the Benton Franklin District Health Dept., the Washington State Department of Health, Department of Ecology, or the respective city.
3. Written approval from the respective municipality if the property is to be served by a public water and/or sewer system.

**Any information submitted to the Benton County Planning Department is subject to public records disclosure law for the State of Washington (RCW Chapter 42.17) and all other applicable law that may require the release of the documents to the public.**

**NOTE: THE APPLICATION FEE OF \$120.00 IS NON REFUNDABLE. THERE ARE NO GUARANTEES THAT YOUR APPLICATION WILL BE APPROVED.**

Upon receiving a complete application, a file will be setup and the application routed to appropriate reviewing agencies. Each agency will review your application and provide the planning department with their comments.

The following information must be satisfied prior to the Child Care Permit being issued:

1. The proposed use has received all necessary approvals from Washington State regarding childcare facilities.
2. The proposed use conforms with all applicable ordinances and regulations of Benton County which also apply to other permitted uses in the applicable zoning district.
3. The proposed use complies with all applicable requirements of the Benton Franklin District Health Dept., Dept. of Social and Health Services, and any municipality providing water or sewer.
4. Signage is limited to no more than one non-illuminating sign, with a maximum area of four (4) square feet and a maximum sign height of six (6) feet above grade. The posting of such signs is limited to the parcel on which the approved child day care facility is located.
5. The outdoor play area is fenced to a height of not less than four (4) feet.
6. Off-Street parking area shall be provided so as to allow one space for every employee.
7. An off-street parking area shall be designated for the loading and unloading of children.
8. The site for the proposed use shall be landscaped in such a manner to be compatible with the surrounding uses.
9. The residential character of an existing residential structure used for the proposed action must continue and maintain the essence of the residential character of the surrounding neighborhood. Any structural or decorative alteration that modifies the residential character is not permitted.
10. The facility shall conform to International Fire Code, state and local fire standards for fire prevention.
11. The facility must comply with International Building Code requirements for the proposed use. You may want to contact the Building Dept. at 509-735-3500 or 786-5622 to determine if your residence can be cost effectively remodeled to comply with the building codes before you apply.

### ***DECISION OF THE PLANNING ADMINISTRATOR***

If the Planning Administrator determines that all of the criteria listed above has been met, written notification will be sent to property owners within 300 feet of the parcel boundaries and they will have fourteen (14) days to submit in writing an appeal of the Administrator's decision accompanied by the non-refundable appeal fee (\$630). If an appeal is received the application shall be referred to the Hearings Examiner who will conduct a public hearing on the appeal. If no appeal is submitted the permit will be issued without holding a public hearing. If conditionally approved, the applicant shall have six months to satisfy the conditions.

### ***DEFINITIONS***

"Child": Means a person seventeen years of age and under.

"Child Care Provider" Means an agency, person or persons who regularly provide childcare

for one or more children for compensation for periods of less than 24 hours a day while such children are apart from their parents or guardians.

"Child Day Care Facility  
Type A":

Means a dwelling unit where a childcare provider cares for twelve (12) or fewer children for periods of less than 24 hours a day.

"Child Day Care Facility  
Type B":

Means a dwelling unit where a childcare provider cares for thirteen (13) or more children for periods of less than 24 hours a day, or a building or structure other than a dwelling unit where a childcare provider cares for any number of children for periods of less than 24 hours a day

*Any questions regarding this process should be directed to the Benton County Planning Department, 786-5612 - Prosser or 736-3086 - Tri-Cities. Our office hours are 8 a.m. to Noon and 1p.m. to 5 p.m. Monday through Friday, except holidays.*

## ***JURISDICTIONS TO BE CONTACTED***

### **Benton County Building Department**

5600 W. Canal Drive, Kennewick  
Prosser - 786-5622  
Tri-Cities - 735-3500  
Prosser Office Hours:  
Tues & Thurs 9-10:30 a.m.

### **Benton County Fire Marshal -**

Benton County Building Department,  
5600 W. Canal Drive.  
Kennewick WA 99336  
Prosser - 786-5622 Tri-Cities - 735-3500

### **Benton Franklin Dist. Health Dept.**

Kennewick Office - 509-460-4205,  
7102 W. Okanogan Pl., Kennewick

### **Department Of Social And Health**

**Services:** Office of Child Care Policy  
500 N. Morain Suite2104  
Kennewick WA 99336  
734-7309

# Benton County

## Building Department

Steve Brown,  
Manager

5600 W. Canal Drive, Ste. C, Box A-105  
Kennewick, WA. 99336

Area Code 509  
Tri-Cities 735-3500  
Prosser 786-5622  
Fax 736-2732

### Benton County Fire Marshal

**Policy:** In Home Daycare

**Date:** Monday, December 29, 2014

**Purpose:**

Provide a uniform method for meeting the requirements for in-home daycares, and to provide the public with information prior to paying for a permit.

**Scope:**

This policy is applicable only to homes within the unincorporated areas of Benton County.

**Procedure:**

Upon receiving a Benton County Planning Department Child Care application, a review of the application shall be made. Appropriate comments shall be made on the Benton County Fire Marshal Review of Proposed Planning Applications Form for Child Care.

A Special Inspection Permit Fee is charged. This fee encompasses both the Building Inspector and the Fire Marshal. After obtaining the permit from the Building Dept. at either the Kennewick Office, on Canal Drive, or at the Planning Dept. in Prosser, and inspection date will be scheduled.

**Requirements**

Child Care facilities with rooms that do not have a door directly to the outside, and in which children are resting, or sleeping must comply with the following:

1. A window must have a finished sill height of not more than 44" above the floor.
2. A window must have a minimum net clear openable area of 5.7 sq. ft. (820 sq.in.) (Figure 1 and Table 1.)
3. A window must have a net minimum clear openable width dimension of 20".
4. A window with a finished sill height that is below the adjacent grade must comply with:
  - a. The window shall be capable of being fully opened and provide a minimum net clear opening of 9 sq.ft. with a minimum dimension of 36".
  - b. Window wells deeper than 44" shall be equipped with approved permanently mounted ladder or stairs that are accessible. See Fig. 3

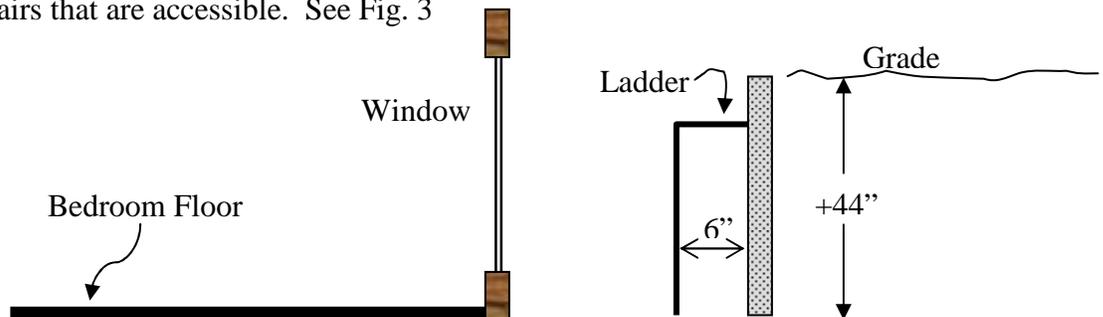


Fig. 3 Window well

- c. The ladder or stairs shall not encroach into the required dimensions of the window well by more than 6". See Fig. 3
- 5. **Family Child Day Care Homes that have 7-12 children must have two remote exit doors from each floor level that the children occupy**
- 6. Smoke detectors are required for each bedroom, and on each level of multiple floor dwellings.
  - a. Existing homes built prior to the adoption of the 19991 UBC may use battery operated smoke detectors.
  - b. New homes built since the adoption of the 1991 UBC must have electrically intertied smoke detectors that are equipped with a battery operated back up.
  - c. A detector is also required in hallways where the hallway ceiling is more than 24" below the Napping area ceiling. See Fig. 2

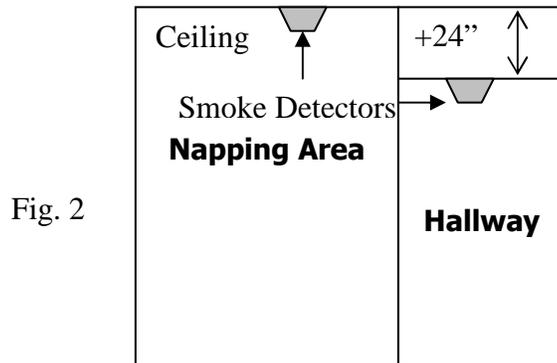


Fig. 2

- 7. At least one 2A10BC (5lb) fire extinguisher is required.

**Clear Minimum Width & Height in inches for windows to obtain the required 820 sq. in of openable area.**

**Table 1.**

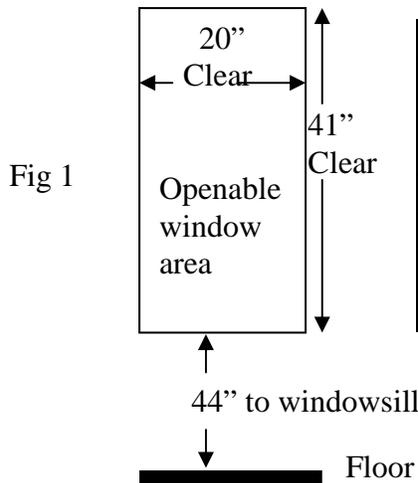
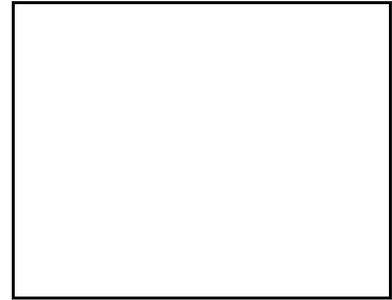


Fig 1

Width	20	20.5	21	21.5	22	22.5	23	23.5	24
Height	41	40	39.1	38.2	37.3	36.5	35.7	34.9	34.2
Width	25	25.5	26	26.5	27	27.5	28	28.5	29
Height	32.8	32.2	31.6	31	30.4	29.8	29.3	28.8	28.3
Width	29.5	30	30.5	31	31.5	32	32.5	33	33.5
Height	27.8	27.4	26.9	26.5	26.1	25.7	25.3	24.9	24.5
Width	34	34.2							
Height	24.1	24	1.						

**BENTON COUNTY PLANNING DEPARTMENT  
CHILD DAY CARE FACILITY TYPE A  
PERMIT APPLICATION**



**File No.** \_\_\_\_\_

1. Applicant Name: \_\_\_\_\_  
Applicant Address: \_\_\_\_\_  
Telephone number: Home \_\_\_\_\_ Work \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ If you prefer to be contacted via email  
please provide your email address: \_\_\_\_\_
2. Legal Owners Name(s): \_\_\_\_\_  
Legal Owners Address: \_\_\_\_\_  
Telephone number: Home \_\_\_\_\_ Work \_\_\_\_\_
3. Parcel Number or Legal description of property for which permit is for:  
\_\_\_\_\_  
\_\_\_\_\_
4. Permit is requested to care for \_\_\_\_\_ number of children. Will this care be provided for  
a period of less than 24 hours a day? Yes \_\_\_\_\_ No \_\_\_\_\_
5. Do you plan to install a sign? Yes \_\_\_\_\_ No \_\_\_\_\_ Size of Sign \_\_\_\_\_  
**The location of the sign must be shown on the site plan included with the  
application.**
6. Is the area proposed for outdoor play fenced? Yes \_\_\_\_\_ No \_\_\_\_\_  
List the height of the existing or proposed fence \_\_\_\_\_.  
**The location of the fence and play area must be shown on the site plan.**
6. How many employees will you have on the premises at any one time? \_\_\_\_\_  
**The location and number of parking spots for the employee parking area must be  
shown on the site plan. Also the area for loading and unloading of children must  
be shown on the site plan.**
7. The property will be served by:  
WATER: Well \_\_\_\_\_ Private System \_\_\_\_\_ City System \_\_\_\_\_  
SEWER: Septic Tank \_\_\_\_\_ City Sewer \_\_\_\_\_ Private Sewer System \_\_\_\_\_  
POWER: PUD \_\_\_\_\_ REA \_\_\_\_\_  
PHONE: Yes \_\_\_\_\_ No \_\_\_\_\_ Name of Utility \_\_\_\_\_  
GAS: Yes \_\_\_\_\_ No \_\_\_\_\_ Name of Utility \_\_\_\_\_  
CABLE: Yes \_\_\_\_\_ No \_\_\_\_\_ Name of Utility \_\_\_\_\_  
IRRIGATION: Yes \_\_\_\_\_ No \_\_\_\_\_ Name of Utility \_\_\_\_\_  
PRIVATE IRR. Yes \_\_\_\_\_ No \_\_\_\_\_ Name of Utility \_\_\_\_\_

8. Applicant has obtained the following permits and/or approvals: **(attach copies)**

- a. Benton Franklin District Health Dept. Yes \_\_\_\_\_ No \_\_\_\_\_
- b. Municipality (water and sewer) Yes \_\_\_\_\_ No \_\_\_\_\_
- c. Washington State DSHS Yes \_\_\_\_\_ No \_\_\_\_\_
- d. State and Local Fire Marshal Yes \_\_\_\_\_ No \_\_\_\_\_

9. Total acres of property: \_\_\_\_\_ Zoning classification of the property: \_\_\_\_\_

10. Describe existing improvements and uses currently existing on the subject property:

\_\_\_\_\_

\_\_\_\_\_

11. Describe existing land uses in the vicinity of subject property:

\_\_\_\_\_

\_\_\_\_\_

**CHILD DAY CARE FACILITY TYPE A PERMIT FEE:** An application fee of \$120.00 must be submitted with the application. Please make the check payable to Benton County Treasurer. **THIS FEE IS NOT REFUNDABLE.**

**I certify that the information given above is true and complete.**

**Signature Block for individuals only.**

Applicant's Signature	Print Name	Date
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Signature of Legal Owners	Print Name	Date
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Signature of Person with additional ownership interest	Print Name	Date
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*ALL persons with an ownership interest in the property on which the land use action is proposed must sign the application other than interests exclusively limited to ownership of the parcel's mineral rights.*

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**If the applicant or legal owner is a corporation/partnership/LLC etc. please use the following signature block. Copy this page if more than one corporation/partnership/LLC etc. signature is required.**

Applicant or Legal Owner: \_\_\_\_\_

By: \_\_\_\_\_,  
(print name) (Title)

Signature: \_\_\_\_\_,  
(Signature) (Title)

The above signed officer of \_\_\_\_\_ warrants and represents that all necessary legal and corporate actions have been duly undertaken to permit \_\_\_\_\_ to submit this application and that the above signed officer has been duly authorized and instructed to execute this application.

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**FOR OFFICIAL USE ONLY:**

Critical Area Review Completed by \_\_\_\_\_ on \_\_\_\_\_.

Application approved for processing by \_\_\_\_\_ on \_\_\_\_\_

Zoning \_\_\_\_\_ Comp Plan Designation \_\_\_\_\_

