APPLICATION DOCUMENTS FOR ALCOHOL AND DRUG TREATMENT FACILITIES (ADA) INITIAL/CHOW APPLICATION

DATE RECEIVED	DOCUMENT	REFERENCE
RECEIVED	CERTIFICATION OF PROGRAM	
	BY SAPTA (Substance Abuse Prevention Treatment Agency)	NRS 449.00455
	DI SAI IA (Substance Abuse Trevention Treatment Agency)	1113 ++9:00+55
	APPLICATION FORM (must be NOTORIZED ORIGINAL)	NRS 449.040
	FEE OF \$782.00 + FEE PER BED OF \$190.00	NAC 449.016
	EVIDENCE OF ZONING APPROVAL (BUSINESS LICENSE,	NAC 449.011(4)(e)
	CONDITIONAL USE VERIFICATION FORM OR SPECIAL USE PE	RMIT) NRS 449.040(10)
	FROM THE LOCAL CITY OR COUNTY JURISDICTION	
		NAC 440 105
	CERTIFICATE OF INSURANCE	NAC 449.105
	LEASE AGREEMENT (if applicable)	NAC 449.011(4)(f)
	PARTNERSHIP AGREEMENT (if applicable)	NAC 49.011(4)(a)(4)
	PARTNERSHIP AGREEMENT(if applicable)ARTICLES OF INCORPORATION(for corporations only)	NAC 49.011(4)(a)(4)
	ARTICLES OF INCORPORATION(for corporations only)ARTICLES OF ORGANIZATION(for LLC's only)	NAC 449.011(4)(g)
		11AC 449.011(4)(g)
	GOVERNING BODY BYLAWS(for corporations only)OPERATING AGREEMENT(for LLC's only)	NAC 449.011(4)(g)
	3 YEAR BUSINESS HISTORY (if less than 3 year history, then resume	
	and 3 letters of reference for the applicant(s) including corporate officer	
	and 5 retters of reference for the appreant(5) menuting corporate officer	s) (NAC ++).011(5)
	FINANCIAL STATUS INFORMATION or STATEMENT	NAC 449.011(3)
	RESUME FOR ADMINISTRATOR	NRS 449.085(4)(a)
	3 LETTERS OF REFERENCE FOR ADMINISTRATOR	NAC 449.011(3)
	*CERTIFICATE OF COMPLIANCE FROM STATE FIRE MARSHALL (DPI	
	send a facility/agency inspection request to the State Fire Marshall (SFM) after t	
	application and fee are submitted. After the SFM office completes their inspecti	ion,
<u> </u>	they will notify DPBH of the facility/agency's compliance)	
	*APPLICANT/ LICENSEE CRIMINAL BACKGROUND CHECK REPORTS FRO THE DEPARTMENT OF PUBLIC SAFETY (DPS) FOR ANY ALCOHOL & DRUC	
	ABUSE TREATMENT FACILITY THAT PROVIDES RESIDENTIAL SERVICES	
	CHILDREN - THIS INCLUDES ALL CORPORATE OFFICERS (DPBH will send	
	to the applicant/licensee regarding the process for obtaining criminal history reports	
	DPS after the application and fee are submitted. Once completed, new applicant/lice background check reports are sent to DPBH directly from DPS. Also refer to the DI	
	website and application packet for instructions regarding fingerprinting)	
	FLOOR PLAN WITH DIMENSIONS	NRS 449.040(7)
	MEDICAL LABS ATTESTATION	NRS 652.080
	PLAN REVIEW APPLICATION ON FILE	
	(for new construction or remodeling)	NAC 449.081(1)
	PERMIT FOR KITCHEN – PLEASE CONTACT LICENSE PROCESS	
	FOR FURTHER INFORMATION	NAC 449.123(2)
	BILL OF SALE (for CHOW only)	NRS 449.040(7)
	8 X 11 PHOTOGRAPH OF THE FACILITY/AGENCY OR ESTIMAT	ED NRS 449.040 (7)
	DATE OF CONSTRUCTION COMPLETION	
	RENEWAL ATTESTATION	

When submitting your application packets you <u>MUST</u> turn in all of the required documents on this checklist with your application packet or your application will be considered incomplete and returned to you.