



SQL #: _____
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APPLICATION DOCUMENTS FOR
HALFWAY HOUSE FOR RECOVERING ALCOHOL AND DRUG ABUSERS (HWH)
 INITIAL/CHOW APPLICATION

FACILITY NAME _____

SUPERVISOR REVIEW/ INITIAL DATE	DATE RECEIVED	DOCUMENT	REFERENCE
		APPLICATION FORM (must be NOTORIZED ORIGINAL)	NRS 449.040
		FEE OF \$2,800.00 + FEE PER BED OF \$368.00	NAC 449.013
		BUSINESS LICENSE ZONING APPROVAL	NAC 449.011(4)(e) NRS 449.040(10)
		LEASE AGREEMENT (if applicable)	NAC 449.011(4)(f)
		PARTNERSHIP AGREEMENT (if applicable)	NAC 49.011(4)(a)(4)
		ARTICLES OF INCORPORATION (for corporations only) ARTICLES OF ORGANIZATION (for LLC's only)	NAC 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(s) and 3 letters of reference for the applicant(s) including corporate officers)	NAC 449.011(3)
		FINANCIAL STATUS INFORMATION or STATEMENT	NAC 449.011(3)
		3 LETTERS OF REFERENCE FOR DIRECTOR	NAC 449.011(3)
		PROOF THAT DIRECTOR IS 21 YEARS OLD	NAC 449.15491(1)
		MEDICAL LABS ATTESTATION	NRS 652.080
		CERTIFICATE OF COMPLIANCE FROM STATE FIRE MARSHAL	NRS 449.150(1)
		FLOOR PLAN WITH DIMENSIONS	NRS 449.040(7)
		BILL OF SALE (for CHOW only)	NRS 449.040(7)
		8 X 11 PHOTOGRAPH OF THE FACILITY/AGENCY OR ESTIMATED DATE OF CONSTRUCTION COMPLETION	NRS 449.040 (7)
		RENEWAL NOTICE ATTESTATON	

DATE RETURNED TO LICENSING _____ SUPERVISOR REVIEW DATE _____

DATE LAST DOCUMENT RECEIVED _____ FIRE MARSHAL REQUEST SENT: _____

DATE NOTIFIED CONCERNING MISSING DOCUMENTS _____ VIA: MEETING FAX MAIL EMAIL

