



APPLICATION DOCUMENTS FOR
PEER SUPPORT RECOVERY ORGANIZATION (PSR)
 INITIAL APPLICATION

RETURNED TO DPBH	DOCUMENT	REFERENCE
	FEE OF \$1000	NAC 449.013(1)(n)
	EVIDENCE OF ZONING APPROVAL (BUSINESS LICENSE, CONDITIONAL USE VERIFICATION FORM OR SPECIAL USE PERMIT) FROM THE LOCAL CITY OR COUNTY JURISDICTION	NAC 449.011(4)(e) NRS 449.040(10)
	CERTIFICATE OF INSURANCE	NAC 449.3972(4)
	PARTNERSHIP AGREEMENT (if applicable)	NAC 49.011(4)(a)(4)
	ARTICLES OF INCORPORATION (for corporations only) ARTICLES OF ORGANIZATION (for LLCs only)	NAC 449.011(4)(g)
	GOVERNING BODY BYLAWS (for corporations only) OPERATING AGREEMENT (for LLCs 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)
	RESUME FOR ADMINISTRATOR	NAC 449.3973(1)(3)
	3 LETTERS OF REFERENCE FOR ADMINISTRATOR	NAC 449.011(3)
	PROOF THAT ADMINISTRATOR IS 18 YEARS OLD	NAC 449.3973 (1)(a)
	FORM INDICATING COMPLIANCE WITH NRS 449.174 FOR EMPLOYEES AND/OR INDEPENDENT CONTRACTORS	NRS 449.123
	*APPLICANT/ LICENSEE CRIMINAL BACKGROUND CHECK REPORTS FROM THE DEPARTMENT OF PUBLIC SAFETY (DPS) - THIS INCLUDES ALL CORPORATE OFFICERS (Refer to the HCQC website and application packet for instructions regarding fingerprinting)	NRS 449.122
	*CERTIFICATE OF COMPLIANCE FROM STATE FIRE MARSHAL (DPBH will send a facility/agency inspection request to the State Fire Marshall (SFM) after the application and fee are submitted. After the SFM office completes their inspection, they will notify DPBH of the facility/agency's compliance)	NRS 449.150(1)
	8 X 11 PHOTOGRAPH OF THE FACILITY/AGENCY OR ESTIMATED DATE OF CONSTRUCTION COMPLETION	NRS 449.040 (7)
	<u>ELDER ABUSE, NEGLECT & EXPLOITATION TRAINING</u>	NRS 449.093
	MANDATORY TRAINING FOR PEER SUPPORT RECOVERY ORGANIZATIONS Minimum of 16 hours for initial training course(s) Minimum of 4 hours annually of continuing education There are two different Division approved trainings you can sign up for. You only have to take ONE.	
	MANDATORY WEBINAR FOR BACKGROUND CHECK REQUIREMENT (See training schedule on website for webinar date and RSVP information)	NRS 449.123

When submitting your application, you **MUST** turn in all of the documents on this checklist, with the exception of Certificate of Compliance from State Fire Marshall & background check reports, or your application packet will be considered incomplete.



DEPARTMENT OF HEALTH AND HUMAN SERVICES
 DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
 BUREAU OF HEALTH CARE QUALITY AND COMPLIANCE