





## Hotel/Motel Application

Email Application to: [eh@carsoncity.gov](mailto:eh@carsoncity.gov)

*Permits are NON-Transferrable and NON-Refundable*

Carson City Health and Human Services Environmental Health Division

900 E Long St Carson City, NV 89706

Phone: 775-887-2190 ext. 80029

[Gethealthycarsoncity.org](http://Gethealthycarsoncity.org)



**The information in this package is to guide the owner or builder through the submittal and approval procedures when obtaining a permit to operate a Hotel/Motel in Carson City and/or Douglas County. NAC 461A and NRS 461A**

- The design of all hotel/motel establishments must be designed with all applicable codes, including but not limited to the: **Nevada Administrative Code 461A and Nevada Revised Statute**
- In Carson City, new businesses and expansions to existing businesses will require that all applicable fees associated with the nature of the establishment be paid before a permit is issued. Please contact Carson City Business License at 108 Proctor Street, Carson City, NV. Phone: (775) 887-2105.
- Submit plans to the Building Dept: Carson (775) 887-2310 and/or Douglas County (775) 782-6200
- The permit is issued upon a passing final inspection and the annual fee is billed.

### Regulations for hotel/motel:

- Nevada Revised Statutes & Nevada Administrative Code (NAC) 461A, which can be found online at <http://leg.state.nv.us/NAC/NAC-461A.html>

### Additional Documentation to be submitted for review:

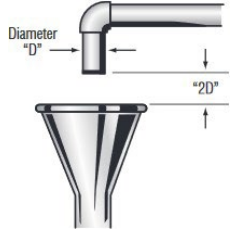
- Written laundry plan must be submitted
- Written list of single use items that will be provided in each room must be submitted
- Written room cleaning schedule must be submitted
- Written Integrated Pest Management (IPM) plan must be submitted
- Written waste management plan must be submitted

### For Construction or New Equipment

- Site plan showing the location of the building, location of building construction, including alleys, streets and location of any outside facilities (ex: dumpsters, patios, walkways).
- Plan drawn to scale of facility showing location of equipment, plumbing, electrical services and mechanical ventilation.

### Required Inspections:

- Carson City Health and Human Services, Environmental Health will perform inspections of all new, remodeled, changes of ownership, and converted facilities.
- You will be contacted by a Health Inspector following review.

<b>Type of Application (check as many as apply)</b>				
Hotel	Motel	Other public accommodation: _____		
Operating Season: _____		Seasonally from _____ to _____	Year Round	
<b>Property</b>				
Total number of rooms: _____				
<b>On the premises (check all that apply, additional applications may be needed)</b>				
Pool/Spa	Food Service	Bar	Market/Store	Stand alone Ice Machine
<b>Construction/Renovation/New Equipment</b>				<i>Not Applicable</i>
Name of Contractor: _____				
Mailing Address: _____				
City: _____		State: _____	Zip: _____	
Primary Phone: ( ) _____		Alternate Phone: ( ) _____	Fax: ( ) _____	
Applicable License #: _____				
Name of Architect/Engineer Firm: _____				
Primary Contact: _____			Email Address: _____	
Mailing Address: _____				
City: _____		State: _____	Zip: _____	
Primary Phone: ( ) _____		Alternate Phone: ( ) _____	Fax: ( ) _____	
<b>Utilities</b>				
Source of Water: Municipal (provide the name of the water utility): _____				Well
Sewer: Municipal (provide the name of the sewer utility): _____				Septic
Waste Management being provided by: _____				
<b>Insect and Rodent Control</b>				
Is commercial pest control used at this establishment?		Yes	No	
Who is providing pest control? _____		How often is pest control servicing? _____		
<b>Laundry Services</b>				
Is laundry conducted on the premises?		Yes- see below	No- see below	
If yes, do washing machines have an adequate air gap into the waste water system? (see picture for reference)			Yes	No
If No, explain below who is providing laundry services, where dirty laundry is being held, laundering frequency, and how it's held and transported after being laundered				
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>				
<b>FINAL STATEMENT and SIGNATURE</b>				
<p><i>I hereby certify that all the above information is correct, and I fully understand that any deviation from the above approval without prior permission from this Health Regulatory Office may nullify this approval. Approval of these plans and specifications by this Health Regulatory Authority DOES NOT indicate compliance with any other code, law or regulation that may be required by federal, state or local agency. It further DOES NOT constitute endorsement or acceptance of the completed establishment, including but not limited to the structure or equipment. A pre-opening inspection of the establishment with the equipment will be necessary to determine if it complies with the State of Nevada and/or Carson City Municipal Codes for a Hotel/Motel.</i></p>				
Signature(s): _____			Date: ____ / ____ / ____	