

Boise County Planning & Zoning Department

413 Main St.
 P.O. Box 1300
 Idaho City, ID 83631
 Phone 208-392-2293
 www.Boisecounty.us



BUILDING PERMIT APPLICATION

Applicant needs to complete <u>unshaded</u> areas only						BP NUMBER:
1. OWNER		MAIL ADDRESS		ZIP	PHONE	
2. CONTRACTOR		MAIL ADDRESS		ZIP	PHONE	
3. LEGAL LOT NO.		BLK	NAME OF SUBDIVISION			SEC/TOWNSHIP/RANGE
DESCR.						
4. JOB ADDRESS:					5. R/A MAP#	
6. PARCEL RP NUMBER:			7. SET BACKS		RECOMMENDED GROUND SNOWLOAD:	
			Front	Right Side	Back	Left Side
8. Are you in a subdivision? Have you received approval form the architectural committee or the home owners association? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA						
9. IN FLOOD PLAIN: <input type="checkbox"/> YES <input type="checkbox"/> NO		FLOOD CERTIFICATE <input type="checkbox"/>		FLOOD MAP NUMBER		
10. TYPE OF CONSTRUCTION <input type="checkbox"/> IA <input type="checkbox"/> IB <input type="checkbox"/> IIA <input type="checkbox"/> IIIA <input type="checkbox"/> IIIB <input type="checkbox"/> IV <input type="checkbox"/> VA <input type="checkbox"/> VB						
11. <input type="checkbox"/> SINGLE FAMILY RESIDENCE <input type="checkbox"/> GARAGE/ CARPORT <input type="checkbox"/> DECK/PORCH <input type="checkbox"/> OUT BUILDING <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL						
12. NEW SQ. FT: HOME () BASEMENT FINISHED () UNFINISHED () GARAGE ()						
OUTBUILDING () DECK/PORCH/PATIO () OTHER ()						
13. MANUFACTURED HOME: YEAR:		MODEL:	MAKE:	VIN NO.		Rehab Docs <input type="checkbox"/>
14. CONSTRUCTION COST/CONTRACT PRICE \$				15. ESTIMATED COMPLETION DATE:		
16. DESCRIPTION OF WORK BEING DONE: (EXAMPLE: NEW HOME/DECK/OUT BUILDING ETC.)						

NOTICE

PLEASE BE ADVISED THAT YOUR RIGHT TO CONSTRUCT A STRUCTURE UNDER THE AUTHORITY OF THE BOISE COUNTY BUILDING PERMIT ORDINANCE MAY BE SUBJECT TO ANY APPLICANT DEED RESTRICTIONS, CODES, COVENANTS, OR RESTRICTIONS THAT RUN WITH THE APPLICANT LAND OR ARE OTHERWISE GOVERNED BY A HOMEOWNERS ASSOCIATION OR RELATED ARCHITECTURAL COMMITTEE. SEPARATE STATE ISSUED PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, HVAC, WOOD-STOVES, FIRE PLACES AND MANUFACTURES HOME INSTALLATION. THIS PERMIT SHALL EXPIRE WHEN THE WORK AUTHORIZED BY SUCH PERMIT IS NOT COMMENCED WITHIN 180 DAYS AFTER IT'S ISSUANCE, OR IF WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE WORK IS COMMENCED. THE BUILDING PERMIT OR COPY THEREOF SHALL BE KEPT ON SITE UNTIL THE COMPLETION OF THE PROJECT. THE GRANTING OF A BUILDING PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE, FEDERAL OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

PERMIT FEES		TOTAL CONSTRUCTION	
Basic	\$	VALUE \$	
PLAN REVIEW	\$	Inspection Zone <input type="checkbox"/> A <input type="checkbox"/> B	
INSPECTIONS	\$	INSPECTOR: BRET CAULDER / JON WATKINS	
GPS Fee	\$	SPECIAL APPROVALS	
WUI FEE	\$	CDHD	# Date:
R/A # Fee	\$	WUI	by:
TOTAL	\$	Inspection	Date:

ADDITIONAL INSPECTIONS MAY BE REQUIRED AFTER THE PLANS ARE REVIEWED AND ADDITIONAL FEES MAY BE ASSESSED TO THIS PERMIT. I CONSENT AND AUTHORIZE THE BOISE COUNTY PLANNING AND ZONING DEPARTMENT STAFF AND IT'S DESIGNATED INSPECTION AGENT(S) TO ENTER THE ABOVE LISTED PROPERTY FOR ANY SITE INSPECTION OR COMPLIANCE PURPOSE ASSOCIATED WITH THIS BUILDING PERMIT.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF THE BUILDING CODES, LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH; WHETHER SPECIFIED HEREIN OR NOT.

SIGNATURE OF OWNER/OWNER BUILDER (DATE)		APPLICATION ACCEPTED BY:	APPROVED FOR ISSUANCE BY:	
SIGNATURE CONTRACTOR/AUTHORIZED AGENT (DATE)		CHECK #	CASH	MONEY ORDER
		RECPT #		CREDIT CARD