

Permit # _____
Date Received _____
By: _____
Payment _____

CITY OF FILER

PLANNING AND ZONING ADMINISTRATION
300 MAIN ST. FILER, ID 83328
TELEPHONE (208)326-5000 FAX (208)326-5002

BUILDING PERMIT APPLICATION

PROPERTY OWNER OF RECORD

Name: _____
Address: _____
City: _____
Phone: _____
Cell or other #: _____
Is the property owner doing the construction?

Yes No

Contractor / Manager

Name: _____
Address: _____
City: _____
Phone: _____
Cell or other #: _____
Idaho Registration #: _____
Expiration Date: _____

Complete and answer ALL questions, provide necessary comment letters, signed COMM Checks when applicable, and two sets of building and site plans (to scale) when submitting application.

1. Parcel No. _____ (i.e.RP10S18E150000 or RPOK383999100-obtained on your tax information or from the County Assessor's Office.)
2. Copy of deed showing ownership including legal description (Obtained from the County Clerk's Office.)
3. If in subdivision: Lot: _____ Block: _____ Subdivision: _____
4. Address of Project (if know): _____
5. ZONE: R-A: _____ R-1: _____ C-1: _____ M-1: _____
6. Acreage : _____ (if less than the acreage listed above for the applicable zone, provide a copy of County Planning and Zoning approval)
7. Are there other structures on this parcel? Yes or No If yes, must be included on the site plan.
8. Corner Lot: Yes No
9. Driving Directions: _____
10. Person to notify regarding the permit: _____ Contact # _____

NO WORK TO BE DONE UNTIL PERMIT IS ISSUED

11. Construction Type and Square Footage:

Description of work: _____

New: 1st Floor: _____ sq/ft. 2nd floor _____ sq/ft 3rd floor: _____ Height: _____

Finished Basement : _____ sq/ft *unfinished basement _____ sq/ft

Daylight basement : _____ sq/ft

Attached garage : _____ sq/ft Attached garage 2nd floor: _____ sq/ft

Covered patio: _____ sq/ft Covered Deck: _____ sq/ft Deck over 30" from grade _____ sq/ft

Covered entry porch/ canopy: _____ sq/ft

Add/Remodel: Main floor : _____ sq/ft 2nd floor: _____ sq/ft Height : _____

Finished basement: _____ sq/ft * Unfinished Basement _____ sq/ft

Daylight basement: _____ sq/ft Attached carport: _____ sq/ft

Attached garage : _____ sq/ft Attached garage 2nd floor: _____ sq/ft

Covered patio: _____ sq /ft Covered Deck: _____ sq/ft Deck over 30" from grade: _____ sq/ft

Covered entry porch/ canopy: _____ sq/ft

Other: Move: _____ sq/ft Detached carport: _____

Detached garage/shop: _____ Detached garage/shop 2nd floor : _____ sq/ft

Accessory storage building: _____ sq/ft Height: _____

Repair (detailed description of work): _____

Other (detailed description of work): _____

Estimated Value: \$ _____ Total Sq/Ft: _____

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12. Three (3) full sets of plans (stamped by an Idaho Licensed Architect or Engineer as appropriate) including the following, which are required to be on a minimum of 11" x 17" paper:

- a. Site plan (see attached instructions)
- b. Floor plans for dimensions
- c. Elevation views
- d. Footing and foundation with reinforcing dimensions
- e. Typical construction detail and fire wall detail
- f. Cross section and stair detail
- g. Truss and floor joist details (if applicable)

PRIOR TO FIRST INSPECTION

**Property address must be posted at public road entrance, (Lot # if in a subdivision)
AND property boundaries must be clearly marked**

I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentatic or omission of fact (whether intentional or not) in this application or any other required document, as well as any misleading statement or omission, may be cause for revocation of permit and/ or certificate of occupancy, regardless of how or when discovered.

I agree to comply with any and all City Ordinances and State laws, rules and regulations regulating building construction or alteration which may be applicable. I understand that the 2012 IRC Building Code is applicable. I understand that this permit is void after 180 days after issuance if work is not commenced. _____ initials

Signature of Owner _____ Date _____

Signature of Applicant _____ Date _____

Office Use Only: Plans reviewed by: _____ Plans approved by : _____

Zoning approved by: _____ Notification to pick up: _____

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