

# CITY OF HOMEDALE BUILDING DEPARTMENT

31 W. Wyoming Ave. PO Box 757 Homedale, ID 83628 Phone: 208-337-4641 Fax 208-337-5904

Building Inspector: Tony Young Phone: 208-870-1022 Email: [TYoung6969@gmail.com](mailto:TYoung6969@gmail.com)

## COMMERCIAL BUILDING PERMIT APPLICATION

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Street Address: \_\_\_\_\_

(new construction address to be assigned by City)

Owner Name & Address: \_\_\_\_\_

Idaho Contractor Registration Number: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Architect or Engineer: \_\_\_\_\_ Phone: \_\_\_\_\_

I hereby submit this application to construct or install:

### REQUIRED PLANS AND SPECIFICATIONS

Idaho State Code requires that all building plans for commercial buildings be approved by an architect.

*(5 complete sets required – drawn to scale)*

New Commercial Building: Square Foot \_\_\_\_\_

- Code Analysis – Use of building, occupant load, required exits, etc.
- Cover Sheet (plan index – building type – square footage)
- Site Plan (including lot lines, private & public utilities, drainage, easements and North arrow)
- Foundation Plan (including reinforcement, ventilation and frost walls for stoops & overhangs)
- Floor Plan (including window & door sizes, ventilation, required exits & lighting)
- Roof, Wall, & Floor Framing Plan
- Elevations (including roof slope, attic ventilation, chimney & building heights)
- Mechanical Plan (HVAC & ducting systems)
- Drainage Plans (include calculations)
- Electrical Plan
- Plumbing Plan (interior & exterior schematic)
- Landscape Plan
- Energy Code Compliance Form (COMCheck)

Tenant Improvement: Square Foot \_\_\_\_\_ Project Value: \$ \_\_\_\_\_

- Cover Sheet (plan index – building type – square footage)
- Floor Plan (including window & door sizes, ventilation, required exits & lighting)
- Roof, Wall, & Floor Framing Plan
- Mechanical Plan (HVAC & ducting systems)
- Electrical Plan
- Plumbing Plan (interior & exterior schematic)
- Energy Code Compliance Form (COMCheck)

Other (specify): \_\_\_\_\_

*(Specify use of building – if warehouse/storage, specify what materials are to be stored)*

Building Dept Approval: \_\_\_\_\_ Date: \_\_\_\_\_

DECLARATION: I HEREBY CERTIFY THAT I HAVE COMPLETED THIS APPLICATION IN A TRUE AND CORRECT MANNER. ALL CITY ORDINANCES WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. GRANTING A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL ANY STATE OR LOCAL LAW OR BUILDING CODE REGULATING CONSTRUCTION.

\_\_\_\_\_  
Date: \_\_\_\_\_

*Signature of Owner or Owner's Authorized Agent*

### OFFICE USE ONLY

\$100 Deposit paid: \_\_\_\_\_

Value: \_\_\_\_\_

Permit Fee: \_\_\_\_\_

Plan Review: \_\_\_\_\_

Sewer Fee: \_\_\_\_\_

Water Fee: \_\_\_\_\_

Permit #: \_\_\_\_\_

Meter Size:  3/4"  1"  2"

**HOMEDALE RURAL FIRE PROTECTION DISTRICT DEVELOPMENT IMPACT FEE  
FEE PAYER DEVELOPMENT SQUARE FOOTAGE AND SPACE USE CERTIFICATION**

Contact: Mike Parker @ Parker Advisors, 19 E Wyoming Ave Homedale, 208-337-3271, mike@parker-advisors.com

Fee Payer Name: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

Building site address: \_\_\_\_\_

\*\*\*Notice to fee payer: The completion and submittal of this form and verification is an express representation, made in good faith, to the Homedale Rural Fire Protection District upon which they will rely in the determination of the impact fee for the issuance of the above referenced building permit application. In the event it is determined by the Fire District that the information herein provided is in error, the the Fee Payer is either entitled to a partial refund or will be subject to pay additional impact fees, as the case may be.

To complete this part of the form, the fee payer first states the total square footage of the building which is the subject of the building permit application. Then the fee payer must mark an "X" in the space to the left of the below reference uses. The fee payer must mark the square footage of use anticipated in the space to the right of the below reference uses as appropriate. If the fee payer does not know the percentage of use, leave the percentage space blank. Impact fee rates will be charged based upon the percentage of use(s). If the percentage of uses is left blank, the fee payer agrees that the impact fee rates will be charged on an average based upon an equal percentage of each intended use. For questions regarding the classification, please contact City Building Official.

Fee payer does hereby certify the square footage and the intended use of the new construction, which is the subject of the above site address, as follows:

Total square footage of the subject building: _____	_____ Residential _____ # of dwelling units
_____ Retail _____ square feet (IBC occupancy classifications: A1, A2, M, R1)	_____ Office _____ square feet (IBC occupancy classification: B)
_____ Industrial _____ square feet (IBC occupancy classifications: F1, F2, H1, H2, H3, H4, H5, S1, S2)	_____ Institutional _____ square feet (IBC occupancy classifications: A3, A4, A5, E, I1, I2, I3, I4)

**VERIFICATION**

The fee payer represents to the Homedale Rural Fire Protection District that the facts and information provided as set forth herein are true, accurate, and complete to the best of the applicant's intentions, knowledge, and belief.

Applicant signature \_\_\_\_\_

Date \_\_\_\_\_

Official Use Only

Amount of Impact Fee to be added to Building Permit: \$ \_\_\_\_\_

Permit # \_\_\_\_\_

Printed Name of Fire District Official: \_\_\_\_\_

Signature of Fire District Official: \_\_\_\_\_

Date: \_\_\_\_\_