City of Donnelly, Idaho BUILDING PERMIT APPLICATION

					1. PARCEL NUMB	ER	R. ADDRESS PG		BOC	CWNER	
Applicant to complete numbered spaces only.							` ,				
2. PHYSICAL	JOB ADDRESS								JOB ADDRESS		
3. LEGAL DESCR.	LOT NO.	BLK	5	SUBDIVISION O	PR TOWNSHIP, SE	CTION AND RANGE					
4. OWNER	I. OWNER MAIL ADDRESS						PHONE				
5. CONTRACTOR MAIL ADDRESS						ZIP	PHONE				
6. ARCHITECT MAIL ADDRESS						ZIP	PHONE				
7. DESIGNER	₹		V V								
8. ENGINEER	₹									סורט	
	UFACTURED HOUR AND LICENSE									NG PE	
10. CLASS	OF WORK:	NEW 🗖 ADDIT	ION 🗖	ALTERATION	N ☐ REPAIR	☐ MOVE ☐ REM	IOVE			DOILDING PERMIT NO	
11. Describe	e work and use									, c	
12. Change	of use from								,		
Change	of use to					1					
13. Valuation of work: \$						\$	\$	\$			
SPECIAL CONDITIONS:						PLAN CHECK	PERMIT FE	F TOT	TOTAL FEE		
						Type of	Occupancy				
						Const. Size of Bldg.	Group No. of	Division Max.	1		
APPLICATION ACCEPTED BY PLANS CHECKED BY APPROVED FOR ISSUANCE					EOD ISSUANCE BY	(Total) Sq. Ft.	Stories	Occ. Load Fire Sprinklers			
AFFLICATION	NACCEPTED BY	PEANS CHECK	IS CHECKED BY		FOR ISSUANCE BY	Fire Zone			ired Tyes No		
		NOTIO	 CE			No. of Dwelling Units					
 SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, HEATING VENTILATION OR AIR CONDITIONING. 						Entit	Initial Initial		Da	ate	
THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 60 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.						DONNELLY CITY CLERK					
						CITY P & Z ADMINISTRATOR					
I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.						CITY ENGINEER - WATER					
						CITY ENGINEER - STORM WATER					
						FIRE DISTRICT		***************************************			
						NLRSWD - SEWER					
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT (DATE)						COUNTY BUILDING INSPECTOR					
						RETURNED TO CIT	CLERK				
SIGNATURE	OF OWNER OR OW	NER BUILDER		(DATE)		CERTIFICATE OF O	CCUPANCY				
Mark Committee of the		WHEN PR	OPERLY	VALIDATE	D (IN THIS SP	ACE) THIS IS YOU	R PERMIT				

PLAN CHECK VALIDATION

CK.

M.O

CASH

PERMIT VALIDATION

CK.

M.O.

CASH