

CITY OF INKOM-INKOM CITY HALL
 365 RAPID CREEK RD-PO BOX 60 INKOM, ID 83245
 PHONE 208-775-3372

BUILDING PERMIT

PERMIT# _____

CONTACT INFORMATION

APPLICANT/PROPERTY OWNER	CONTRACTOR
Name:	Name:
Mailing Address:	Mailing Address:
City, State, Zip:	City, State, Zip:
Phone:	Phone:
Email:	City Business License: <input type="checkbox"/> Yes <input type="checkbox"/> No
	State Contractors #:

PROJECT INFORMATION

PROJECT DESCRIPTION: _____

PROJECT LOCATION

Parcel #:		Address:	
Subdivision:		Block:	Lot:

BUILDINGS, STRUCTURES & FLOOD DETAILS

Structure Use	Structure Work	Square Footage		Flood Information
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Non-Residential <input type="checkbox"/> Agricultural <input type="checkbox"/> Change of Use <input type="checkbox"/> Other _____	<input type="checkbox"/> New Primary <input type="checkbox"/> New Accessory <input type="checkbox"/> Addition/Remodel <input type="checkbox"/> Demolition <input type="checkbox"/> Manufactured <input type="checkbox"/> Other _____	Basement _____ Crawlspace _____ 1 st Floor _____ 2 nd Floor _____ 3 rd Floor _____ Woodstove/Fireplace <input type="checkbox"/> Yes <input type="checkbox"/> No Estimated Building Cost \$ _____	Attached Garage _____ Detached Garage _____ Patio/Deck _____ Barn/Shop _____ Other _____	<input type="checkbox"/> (NO development if BFE is Increased) <input type="checkbox"/> 100 Year Flood Plain Elevation Certificate Required <input type="checkbox"/> 500 Year Flood Plain elevation Certificate Required <input type="checkbox"/> Not in the Flood Plain

READ BEFORE SIGNING:

Owner or Contractor MUST call for inspections in accordance with Ordinances of the City of Inkom. This permit will become null and void if the building or work authorized by permit is not commenced within 180 days from the date of such permit, or if building or work is suspended or abandoned at any time after the work is commenced for a period of 180 days. It is illegal to occupy or use the building herein permitted until approved by the Building Official and the City of Inkom.

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 comply with and granting of this permit does not presume to give authority to violate or cancel the provisions of any other State or Local Law Regulation construction or the performance of construction.

SIGNATURE OF OWNER

Signature:
Print Name:
Date:

FOR OFFICIAL USE ONLY

GROUP: _____	APPROVED: _____
TYPE: _____	REJECTED: _____
Building Permit Fee: \$ _____	

Building Official

Date

Remarks/Notes:

CITY OF INKOM PLANNING AND ZONING COUNCIL

APPROVED REJECTED

Planning & Zoning Official

Date

Remarks/Notes:

CITY HALL USE

Sewer Connection:	<input type="checkbox"/> Connection Fee Paid
Construction clear of lines:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____
Installed/Inspected Properly:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____
Water Connection:	<input type="checkbox"/> Connection Fee Paid <input type="checkbox"/> Meter Installation Fee Paid
Construction clear of lines:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____
Installed/Inspected properly:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: _____
Comments:	
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