



BUILDING PERMIT APPLICATION

Community & Economic Development Department

8930 N Government Way, Hayden, ID 83835

E-mail application to permits@cityofhaydenid.us

(208) 209 2025

PROPOSED WORK

Work site address:	Valuation: \$
Parcel Number:	Square Feet:
Describe work (include proposed use):	State sewer permit:
	Design professional sheet?: <input type="checkbox"/> Y <input type="checkbox"/> N
	To be condo platted?: <input type="checkbox"/> Y <input type="checkbox"/> N
	Asbestos?: <input type="checkbox"/> Y <input type="checkbox"/> N

PROPERTY OWNER(S)

Name(s): _____
 Address: _____
 E-Mail: _____ Phone: _____ Cell: _____

NOTICE TO OTHER JURISDICTIONS

Obtain signatures prior to submitting application for new buildings, shops or additions

Water District:	District:	Date:
Fire Dept:	District:	Date:
Panhandle Health:		Date:
Sewer (if not sewered by Hayden):		Date:

CONTRACTORS

General Contractor:	ID State Reg #:
Address:	Email:
Contact Person:	Contact phone:
Mechanical Contractor:	ID HVAC Lic #:
Address:	Email:
Contact Person:	Contact phone:
Contract amount (attach contract)	Res mech worksheet: <input type="checkbox"/> Y <input type="checkbox"/> N

CERTIFICATIONS

I hereby certify that I have read the application and that the information provided in this application is true and accurate.
 I hereby certify that the proposed work is authorized by the Owner of Record and that I have been authorized by the Owner to submit this application as his/her agent.
 I hereby certify that I am responsible for all fees associated with this application and subsequent permit once approved. I understand that all additional fees incurred after permit issuance will be invoiced to me as the applicant.
 I hereby certify that construction shall be installed in accordance with the building codes adopted by the City of Hayden and the approved construction documents. Any changes that are not in compliance with the approved construction documents shall be resubmitted for approval as an amended set of construction documents.
 I understand that this application becomes null & void if not purchased within 180 days from submittal date unless application has been pursued in good faith and permit has been issued.

Applicant Signature	<input type="checkbox"/> I understand & agree that marking this box is a substitute for & will be accepted as my signature
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Print/type name: _____ Date: _____
 Company: Owner Other: _____
 Applicant email address: _____ Phone: _____
 Call for payment by credit card? Y N Phone: _____

FOR OFFICE USE ONLY

Permit # _____ Date accepted: _____
 Approved By: _____ Date: _____ Fee: _____