



**BUILDING & SAFETY
DEPARTMENT**
115 So. Main Street
Hailey, ID 83333
(208) 788-9815

APPLICATION FOR BUILDING PERMIT

BLDG APP WATER & WASTEWATER ENCROACHMENT
 ABOVE CODE COMMUNITY HOUSING
 (ENERGY STAR)

CUSTOMER# _____

OWNER: _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **CELL:** _____

EMAIL ADDRESS: _____

CONTRACTOR: _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **CELL:** _____

EMAIL ADDRESS: _____

CONTRACTOR REGISTRATION NO.: _____ **Mandatory**

ESTIMATED COST OF CONSTRUCTION: \$ _____
(New construction shall be calculated at \$120 per sq. ft per ordinance)

CLASS OF WORK: NEW COMMERCIAL NEW RESIDENTIAL ALTER

REPAIR MOVE ENLARGE OTHER

Please specify: (sheds, decks, pergola, or any accessory structure over 120 sq ft)

(\$75) DEMO

Completion Date (Expires 90 days after issuance)

DESCRIPTION OF WORK: _____

STREET ADDRESS OF WORK: _____

LEGAL DESCRIPTION OF LAND: LOT# _____ BLOCK # _____ SUBDIVISION _____

LOT AREA: _____ SQ. FT. **LOT IN FLOOD PLAIN:** NO YES (if YES provide Floodplain Development Permit application)

ZONING: A B GR LR-1 LR-2 TN LB LI TI SCI-I SCI-SO RGB

TYPE OF CONSTRUCTION: _____

New Construction or Addition Fees Only

Total Floor Area of First Floor: _____ Sq. Ft. x \$120 _____

NO. OF STORIES: _____ **NUMBER OF UNITS:** _____

(If residential, carry this number of units over to page 2)

Total Floor Area of Second Floor: _____ Sq. Ft. x \$120 _____

Total Floor Area of Basement: _____ Sq. Ft. x \$53.39 _____

SET-BACKS: Front: _____ ft. Rear: _____ ft.

Total Floor Area of Garage: _____ Sq. Ft. x \$41.07 _____

Right Side: _____ ft. Left Side: _____ ft.

Total floor Area of out Buildings: _____ Sq. Ft. Water Source: _____ Type of Sewage Disposal: _____

****SEE REVERSE SIDE** (Signature pg. 2)**

Permit No: _____

Date Filed: _____

Base Permit Fee: \$ _____

(Based on Construction Cost)

Plan Review Fee: \$ _____

(65% of Base Permit Fee)

Subtotal: \$ _____

Final Inspection Fee: \$ _____

(25% of Subtotal; refundable)

Development Impact Fee: \$ _____

(See reverse side)

Hailey Fire Dept. Fee: \$ _____

(25% of Plan Review Fee -

Where applicable)

Total Fees: \$ _____

Requires Approval of Yes

Planning Department No

Official Use Only

EXHIBIT "A"

Development Impact Fee Schedule

<i>ITE Code</i>	<i>Trans- Parks / portation/ Police / Fire & EMS / CIP Cost / Total</i>					<i>No. of Units</i>	<i>Total \$ Amt.</i>	
Residential								
	Per Housing Unit							
210 Single Family Detached	\$934	\$903	\$365	\$350	\$77	\$2,629		
230 All Other Housing Types	\$782	\$553	\$305	\$293	\$77	\$2,010		
<i>Multiply the values from the TOTAL column X the sq.ft. of the project</i>								
	<i>Trans- portation / Police / Fire & EMS / CIP Cost / Total</i>							
Nonresidential								
	Per Square Foot of Floor Area					No. of Units	Total Sq. Ft.	Sub Total
820 Commercial / Shop Ctr 25,000 SF or less	\$4.94	\$0.31	\$1.33	\$0.06	\$6.64			
820 Commercial / Shop Ctr 25,001-100,000 SF	\$3.58	\$0.23	\$1.00	\$0.06	\$4.87			
820 Commercial / Shop Ctr 100,001 SF or more	\$2.60	\$0.16	\$0.80	\$0.06	\$3.62			
710 General Office 25,000 SF or less	\$1.46	\$0.09	\$1.66	\$0.06	\$3.27			
710 General Office 25,001 SF or more	\$1.25	\$0.08	\$1.56	\$0.06	\$2.95			
720 Medical-Dental Office	\$2.89	\$0.18	\$1.62	\$0.06	\$4.75			
610 Hospital	\$1.40	\$0.09	\$1.35	\$0.06	\$2.90			
770 Business Park	\$1.02	\$0.06	\$1.26	\$0.06	\$2.40			
110 Light Industrial	\$0.55	\$0.03	\$0.92	\$0.06	\$1.56			
150 Warehousing	\$0.39	\$0.02	\$0.51	\$0.06	\$0.98			
151 Mini-Warehouse	\$0.20	\$0.01	\$0.01	\$0.06	\$0.28			
Other Nonresidential								
320 Lodging (per room)	\$450.00	\$29.00	\$176.00	*	\$655.00			
520 Elementary School (per student)	\$103.00	\$6.00	\$32.00	*	\$141.00			
530 Secondary School (per student)	\$136.00	\$8.00	\$36.00	*	\$180.00			
565 Day Care (per student)	\$358.00	\$23.00	\$64.00	*	\$445.00			
620 Nursing Home (per bed)	\$189.00	\$12.00	\$144.00	*	\$345.00			
* Other nonresidential will also pay the cost of CIP preparation at the rate of \$0.06 per square foot of floor area.								
Total								

The Completion of this Application Does Not Constitute a Building Permit

NOTE: Original permits are only valid for 548 days; Extensions are only valid for 180 days; Demo permits are only valid for 90 days.

In the event there is a dispute between the owner and contractor as to the refund of the final inspection fee deposit and such dispute is not resolved within ten (10) business days of a demand for payment of the deposit, the city of Hailey shall be entitled to file an interpleader action in the Fifth Judicial District, Blaine County, Idaho, as provided by statute, and shall recover its attorney fees and costs as provided in Idaho Code § 5-321.

I hereby acknowledge that I have filled in this application accurately to the best of my knowledge and that I agree to comply with all City Ordinances and State laws regulating building construction to the City of Hailey, Idaho.

X _____ Date: ____/____/____
Signature of Contractor, Owner, or Authorized Agent

“Homeowners Association, if applicable, may require additional approvals for the subject’s property improvements.”

Approved Denied _____ Date: ____/____/____
Building Department Representative