

CITY OF FRUITLAND

Building Department
200 S. Whitley Drive
Fruitland, ID 83619
Ph: 452-4421 Fax: 452-6146



BUILDING PERMIT APPLICATION

PROJECT INFORMATION

Project Address (Will be assigned for all new construction):

Lot No.	Block No.	Subdivision:	
Owner:		Contact:	
Address:		City	State Zip
Phone:	Cell:	Fax:	E-Mail:
Contractor:		Idaho Registration #:	Exp. Date:
Address:		City	State Zip
Phone:	Cell:	Fax:	E-Mail:
Architect/Engineer:			
Address:		City	State Zip
Phone:	Cell:	Fax:	E-Mail:

CLASS OF WORK

<input type="checkbox"/> New Dwelling	First Story: _____ sq.ft.	Garage: _____ sq.ft.
<input type="checkbox"/> Townhouse	Second Story: _____ sq.ft.	Cover Porch/Patio: _____ sq.ft.
<input type="checkbox"/> Duplex	Basement: _____ sq.ft.	Covered Carport: _____ sq.ft.
<input type="checkbox"/> Commercial	Total Living Square Footage: _____	Shop/Storage Bldg: _____ sq.ft.
<input type="checkbox"/> Shop/Storage Bldg		
<input type="checkbox"/> Addition- Describe:		
<input type="checkbox"/> Remodel- Describe:		
<input type="checkbox"/> Repair- Describe:		
<input type="checkbox"/> Misc/Storage building- Describe:		
<input type="checkbox"/> Scope of work: (if other than above)		Valuation of Work: \$

OFFICIAL USE ONLY

Building Permit #:	Complies W/Rescheck <input type="checkbox"/> Yes <input type="checkbox"/> No	Application received by:
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Owner or Owners Authorized Agent: _____ **Date** _____