

# CITY OF FRUITLAND

Building Department  
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# BUILDING PERMIT APPLICATION

## PROJECT INFORMATION

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

|                            |           |                       |            |
|----------------------------|-----------|-----------------------|------------|
| Lot No.                    | Block No. | Subdivision:          |            |
| <b>Owner:</b>              |           | <b>Contact:</b>       |            |
| Address:                   |           | City                  | State Zip  |
| Phone:                     | Cell:     | Fax:                  | E-Mail:    |
| <b>Contractor:</b>         |           | Idaho Registration #: | Exp. Date: |
| Address:                   |           | City                  | State Zip  |
| Phone:                     | Cell:     | Fax:                  | E-Mail:    |
| <b>Architect/Engineer:</b> |           |                       |            |
| 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                           | <b>Total Living Square Footage:</b> _____ | Shop/Storage Bldg: _____ sq.ft. |
| <input type="checkbox"/> Shop/Storage Bldg                    |   |                                 |
| <input type="checkbox"/> Addition- Describe:                  |   |                                 |
| <input type="checkbox"/> Remodel- Describe:                   |   |                                 |
| <input type="checkbox"/> Misc/Storage building- Describe:     |   |                                 |
| <input type="checkbox"/> Scope of work: (if other than above) | <b>Valuation of Work: \$</b>              |                                 |

*Idaho Code Chapter 22 of Title 55 requires excavators to call 811 or 1-800-342-1585 not less than two (2) business days nor more than ten (10) business days before scheduled date for commencement of excavation.*

**Owner or Authorized Agent:** \_\_\_\_\_ **Date** \_\_\_\_\_