



COMMERCIAL/MULTI-FAMILY APPLICATION CHECKLIST

The following items should be completed before you submit your building permit application.

*Reasonable accommodations will be made upon request.

Complete the Following:

- 3 sets of site plans (see Site Plan Checklist on page 2)
- 3 sets of building plans (see box below) – stamped by a licensed professional
 - Electrical panel layout and calculations included with building plans.
 - Exterior Lighting Plan including photometric layout.
- Digital Plans (PDF Format – can be submitted by USB, CD, or Dropbox)
- Structural Calculations (see box below) – stamped by a licensed Engineer
- Energy Compliance Report: As per the 2012 IECC, a COMCheck is required (available online at www.energycodes.gov)
- Permit Policies Acknowledgment signed. (see page 3)
- Building Permit Application signed by a registered General Contractor. (see page 4)
- Exemptions from State Registration (see page 5)
- Affidavit of Legal Interest signed. (see page 6)
- Property Line form signed by builder. (see page 7)
- Mechanical Permit Application signed by a registered Mechanical Contractor. (see page 8)
- Electrical Permit Application signed by a registered Electrical Contractor. (see page 9)
- Plumbing Permit Application signed by a registered Plumbing Contractor. (see page 10)
- Fire Alarm Permit Application (if applicable) signed by a registered professional. (see page 11)
- Fire Sprinkler Permit Application (if applicable) signed by a registered professional. (see page 12)
- Subcontractor list filled out. (see page 13)
- Commercial Projects: Completed Business Use Summary. (see page 14)

Seismic Design Category – D
(unless soil evaluation confirms category C)
Ground Snow – 50 lbs. per sq. ft.
Roof Snow Load – 35 lbs. per sq. ft.
Wind Load – 90 MPH
Frost Depth – 36”



SITE PLAN CHECKLIST

- 1 Site plan must be drawn to scale, be legible and also be submitted electronically if possible.
- 2. Adjoining streets labeled.
- 3. Right-of-way location and width, curb to curb widths and sidewalk location.
- 4. Building location, sq footage and dimensions, with distance to property lines and distances between buildings.
- 5. Show existing and proposed easements.
- 6. Existing utilities (waterlines, sanitary sewer lines, manholes, storm drains).
- 7. Proposed utilities including tie in location to existing services and new easements.
- 8. Proposed storm drain and sanitary sewer elevations (for pipe inverts at manholes and catch basins).
- 9. Storm drainage plan for parking lot and roof areas, with calculations.
- 10. Fire hydrants and fire suppression lines (including tie to City lines).
 - Sprinkled
 - Not Sprinkled
- 11. Indicate Fire apparatus access.
- 12. Parking (including parking lot, drainage arrows, dimension of lot, distance between rows, and total numbers).
- 13. Landscaping (type and total area, including dimensions).
- 14. Trash facilities.
- 15. North Arrow Included
- 16. Proposed street improvements (curb, gutter, sidewalk, pavement, etc.)
- 17. Legal description of proposed building site included.
- 18. Percent of lot covered by building or paving calculated.
- 19. Show 10% snow storage area.
- 20. Distance of entrances from street corner indicated.
- 21. Current Vicinity Map. (8 1/2 x 11") at 1" = 300' scale, showing location of the property.
- 22. Lighting Plan

SITE PLANS MUST BE COMPLETE AND SUBMITTED FOR REVIEW **BEFORE** THE PROJECT WILL BE PLACED ON THE PLANNING & ZONING AGENDA.



Permit Policies Acknowledgement

The City of Rexburg Building Safety Department is determined to provide excellent customer service. In an effort to help you understand the City of Rexburg Permit Policies, listed below are several policies which you are required to know prior to proceeding with your project.

Any construction within the City of Rexburg which requires a permit shall not begin until an approved permit is obtained. If you do not have a pink building permit signed by the Building Inspector, then you do not have an approved permit.

- Building without the pink building permit signed by the Building Inspector will result in double fees to be assessed and the project to be red tagged. If your project is red tagged, halting all construction, only a City Official may remove the red tag. If the red tag is removed by anyone but a City Official, citations will be issued.

No building may be occupied without receiving a signed Certificate of Occupancy.

- If a building is occupied without receiving a signed Certificate of Occupancy, citations will be issued and the occupants will be evicted.

Calling in inspections is the responsibility of the applicant and their contractor. Inspections need to be called into the hotline and not to the inspector. Inspections called in later than 8 AM will be scheduled for the following business day.

- If an inspection is not done, the inspector may require any measures to be taken to allow him to correctly perform the inspection. (Example: If the electrical rough in inspection is not done and the sheetrock has been put up, the inspector may require the sheetrock be removed in order to perform the electrical rough in inspection.)

Any approval for Certificate of Occupancies and Building Permits is only verified through the Permit Technician. If an inspector says something like "You're good to go", understand that you still need to receive all relevant documentation from the Permit Technician before you are truly good to go.

- Even if you hear from an inspector that 'you're good to go', ultimately if you do not have a Building Permit or Certificate of Occupancy, the above policies will be enforced.

It is your responsibility to relay this information on to anyone who this would be applicable to for your project. All sub-contractors will be held to this standard with no exceptions.

- The above policies will be enforced to all, regardless if you pass this information on to them or not.

Applicant's Name (print): _____ Signature: _____ Date: _____



BUILDING APPLICATION
Commercial/Multi-family Residence

For Office Use Permit Number: _____ Deposit Amount: <input type="checkbox"/> \$1000 New Const. <input type="checkbox"/> \$250 Addition <input type="checkbox"/> \$100 Other	Digital Plans Included: <input type="checkbox"/> CD <input type="checkbox"/> USB <input type="checkbox"/> Dropbox <input type="checkbox"/> Not Included Permit Type: <input type="checkbox"/> New <input type="checkbox"/> Remodel <input type="checkbox"/> Addition Deposit Included with Application: <input type="checkbox"/> Yes <input type="checkbox"/> No
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1. Property Owner
 Name: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Phone & Type: _____ Office Mobile Email: _____
 Under Idaho Building Code, a contractor must do the work for a Commercial Building.

2. Applicant
 Name: _____ Role: (Owner, Tenant, Contractor, etc.) _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Phone & Type: _____ Office Mobile Email: _____
 Contact/Rep. Name: _____ Phone: _____ Email: _____

3. General Contractor
 Name: _____ Registration #: _____ Exp.: _____
 Address: _____ City: _____ State: _____ Zip Code: _____
 Phone & Type: _____ Office Mobile Email: _____
 Contact/Rep. Name: _____ Phone: _____ Email: _____

General Contractor Authorized Signature: _____ Date: _____

4. Project Description
 Address: _____ **-OR-** Lot #: ___ Block #: ___ Subdivision: _____
 Type of work:
 Check one: New Construction Remodel* Addition*
 Check all that apply: Framing Mechanical Plumbing Electrical
NOTE: Any sub-contractors involved will need to submit their own signed applications.
 Description of work: _____
 *Total cost of project - materials and labor: \$ _____ (used to calculate permit fees) # Of Buildings: _____
 Building 1: _____ Units _____ sq. ft. Building 2: _____ Units _____ sq. ft. Building 3: _____ Units _____ sq. ft.
 Additional Buildings: _____
 Utility, Misc, Private Garage: _____ sq. ft. Storage: _____ sq. ft.

APPLICANT'S SIGNATURE, CERTIFICATION AND AUTHORIZATION: Under penalty of perjury, I hereby certify that I have read this application and state that the information herein is correct and I swear that any information which may hereafter be given by me in hearings before the Planning and Zoning Commission or the City Council for the City of Rexburg shall be truthful and correct. I agree to comply with all City regulations and State laws relating to the subject matter of this application and hereby authorized representatives of the City to enter upon the above-mentioned property for inspections purposes. NOTE: The building official may revoke a permit on approval issued under the provisions of the 2012 International Code in cases of any false statement or misrepresentation of fact in the application or on the plans on which the permit or approval was based. Permit void if not started within 180 days. Permit void if work stops for 180 days.

Applicant's Name (print): _____ Signature: _____ Date: _____



EXEMPTIONS FROM STATE REGISTRATION

As of January 1, 2006, the City of Rexburg can no longer sell permits without having a copy of your State registration number or your exemption from the State registration. Please send a copy of your state registration or fill out this form showing your exemption and send it with your license renewal or your next permit application.

(This list is a summarization of Idaho Code Title 54 Chapter 5205, for full definitions of these exemptions please see the State's website at www.ibol.idaho.gov/cont.htm)

Currently State licensed pursuant to Title 54 Idaho Code, Chapters:

- 3 Architects,
- 10 Electrical Contractors/Journeyman,
- 12 Engineers/Surveyors,
- 19 Public Works Contractors (exempt from fee only registration required),
- 26 Plumbing/Plumbers,
- 45 Public Works Construction Management Licensing Act (exempt from fee only registration required), or
- 50 Installation of heating, ventilation and air conditioning systems

- Employee or volunteer of a licensed contractor or part of an educational curriculum or nonprofit charitable activity with no wages or salary
- Employee of a US Government agency (State, City, County, or other municipality)
- Public Utility doing construction, maintenance, or development to its own business
- Involved with gas, oil or mineral operations
- Supplier doing no installation or fabricating
- Contracting a project or projects with a total cost less than \$2000
- Operation of a farm or ranch or construction of agriculture buildings exempt from Idaho Building Code
- Any type of water district operations
- Work in rural districts for fire prevention purposes
- Owner who performs work on own property or contracts with a registered contractor to do work as long as the property is not for resale within 12 months
- Owner or lessee of commercial property performing maintenance, repair, alteration or construction on that property
- Real estate licensee/property manager acting within Idaho Code
- Engaging in the logging industry
- Renter working on the property where they live with the property owners approval
- Construction of a building used for industrial chemical processing per Idaho Code
- Construction of a modular building (defined by Idaho Code) to be moved out of state

I hereby certify that the above information is true and correct to the best of my knowledge.

Signature

Date

Print Name



Affidavit of Legal Interest

State of Idaho
County of Madison

I, _____, _____
Name **Address**

City **State**

Being first duly sworn upon oath, depose and say:
(If Applicant is also Owner of Record, skip to B)

A. That I am the record owner of the property described on the attached, and I grant my permission to:

Name Address

to submit the accompanying application pertaining to that property.

B. I agree to indemnify, defend and hold Rexburg City and its employees harmless from any claim or liability resulting from any dispute as to the statements contained herein or as to the ownership of the property which is the subject of the application.

Dated this _____ day of _____, 20_____

Signature

Subscribed and sworn to before me the day and year first above written.

Notary Public of Idaho

Residing at: _____

My commission expires: _____



Property Lines

Each site plan that is submitted to the City of Rexburg for the Building Permit process requires that property lines are shown accurately. It is the Developer's responsibility to correctly identify on the site plan the location of these lines in reference to the public right-of-way, other adjoining property lines, the street, other structures and all utility lines. The Developer should find property pins that are still available at the lot in question. If these pins do not exist or have become unrecognizable then a new survey should be performed.

Accurate property line information is a must for a timely review. In addition to finding existing property pins, legal descriptions should be checked. The best way to identify property line location is with a land survey. The City of Rexburg has aerial photos and a parcel line layer that can be checked, but they are only a tool and are not guaranteed for accuracy. If you want to request a copy of your lot, see the front counter at the Community Development Department.

I have read and understand the above requirements.

Signature

Date

Printed Name



BUILDING APPLICATION
Mechanical

For Office Use
Permit Number: _____ Permit Type: New Remodel Addition Basement Finish
Fees Paid: Yes No

1. Property Owner
Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Phone & Type: _____ Office Mobile Email: _____
Under Idaho Building Code, a homeowner is allowed to do work on their own home.
Are you a homeowner doing work on your own home? Yes (Skip to #3 and complete the Homeowner's Exemption page)
 No: I am a contractor working for the homeowner No: This property is a Multi-family Residence or Commercial Property.
NOTE: Any contractors/sub-contractors involved will need to submit their own signed applications.

2. Mechanical Contractor
Name: _____ Registration #: _____ Exp.: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Phone & Type: _____ Office Mobile Email: _____
Contact/Rep. Name: _____ Phone: _____ Email: _____
Mechanical Contractor Authorized Signature: _____ Date: _____

3. Project Description
Address: _____ -OR- Lot #: ___ Block #: ___ Subdivision: _____
Check one: Single-family Residence Multi-family Residence Commercial
Check one: New Construction* Remodel Addition Basement Finish
Description of work: _____

New Commercial Work: Contracted amount: \$ _____ Calculated Fee (See Below): \$ _____
 Up to \$10,000 = (total cost of system x .02) + \$60 \$10,001-\$100,000 = ((total cost of system -10,000) x .01) + \$260
 Over \$100,001 = ((total cost of system -100,000) x .005) + \$1,160

New Single-Family Residential Work: _____ Sq. Ft.
 Up to 1,500 Sq. Ft. = \$130 1,501-2,500 Sq. Ft. = \$195 2,501-3,500 Sq. Ft. = \$260 3,501-4,500 Sq. Ft. = \$325
 Over 4,500 Sq. Ft. = \$325+(65 x # of additional 1,000 Sq. Ft. (or portion thereof)) \$ _____

New Multi-Family Residential: Duplex = \$260 Three or more units = \$((130 x # of buildings)+(65 x # of units))\$ _____

New work on any other residence and Detached Shops: = \$(65 + (10 x # of HVAC fixtures)) \$ _____

Miscellaneous: Gas Pressure = \$65 Furnace or A/C = \$65 Water Heater = \$65 Requested Inspection = \$65
 Gas Line = \$65 Fireplace/Solid Fuel Burning Unit = \$65 Technical Service = \$65/hour
 Plan Check = 10% of Contracted Amount

APPLICANT'S SIGNATURE, CERTIFICATION AND AUTHORIZATION: Under penalty of perjury, I hereby certify that I have read this application and state that the information herein is correct and I swear that any information which may hereafter be given by me in hearings before the Planning and Zoning Commission or the City Council for the City of Rexburg shall be truthful and correct. I agree to comply with all City regulations and State laws relating to the subject matter of this application and hereby authorized representatives of the City to enter upon the above-mentioned property for inspections purposes. NOTE: The building official may revoke a permit on approval issued under the provisions of the 2012 International Code in cases of any false statement or misrepresentation of fact in the application or on the plans on which the permit or approval was based. Permit void if not started within 180 days. Permit void if work stops for 180 days.

Applicant's Name (print): _____ Signature: _____ Date: _____



BUILDING APPLICATION
Electrical

For Office Use
Permit Number: _____ Permit Type: New Remodel Addition Basement Finish
Fees Paid: Yes No

1. Property Owner
Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Phone & Type: _____ Office Mobile Email: _____
Under Idaho Building Code, a homeowner is allowed to do work on their own home.
Are you a homeowner doing work on your own home? Yes (Skip to #3 and complete the Homeowner's Exemption page)
 No: I am a contractor working for the homeowner No: This property is a Multi-family Residence or Commercial Property.
NOTE: Any contractors/sub-contractors involved will need to submit their own signed applications.

2. Electrical Contractor
Name: _____ Registration #: _____ Exp.: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Phone & Type: _____ Office Mobile Email: _____
Contact/Rep. Name: _____ Phone: _____ Email: _____
Electrical Contractor Authorized Signature: _____ **Date:** _____

3. Project Description
Address: _____ **-OR-** Lot #: ___ Block #: ___ Subdivision: _____
Check one: Single-family Residence Multi-family Residence Commercial
Check one: New Construction* Remodel Addition Basement Finish
Description of work: _____

New Commercial Work: Contracted amount: \$ _____ Calculated Fee (See Below): \$ _____
 Up to \$10,000 = (total cost of system x .02) + \$60 \$10,001-\$100,000 = ((total cost of system -10,000) x .01) + \$260
 Over \$100,001 = ((total cost of system -100,000) x .005) + \$1,160

New Single-Family Residential Work: _____ Sq. Ft.
 Up to 1,500 Sq. Ft. = \$130 1,501-2,500 Sq. Ft. = \$195 2,501-3,500 Sq. Ft. = \$260 3,501-4,500 Sq. Ft. = \$325
 Over 4,500 Sq. Ft. = \$325+(65 x # of additional 1,000 Sq. Ft. (or portion thereof)) \$ _____

New Multi-Family Residential: Duplex = \$260 Three or more units = \$((130 x # of buildings)+(65 x # of units))\$ _____

New work on any other residence and Detached Shops: = \$(65 + (10 x # of branch circuits)) \$ _____

Miscellaneous: Small Works (work costing less than \$200 with no change in service connections)=\$10(needs no inspection).
 Central Heating/Cooling Systems = \$65 Spas, Hot Tubs, and Swimming Pools = \$65 Requested Inspection = \$65
 Pumps - Water, Irrigation, Sewage (per motor) = \$65 up to 25HP \$95 26- 200HP \$130 over 200HP
 Irrigation Machine = \$65 for center pivot + \$10 per tower of drive motor \$ _____ Technical Service = \$65/hour
 Temporary Amusement = \$65 + \$10 per ride, concession, or generator \$ _____ Plan Check = 10% of Contracted Amount
 Temporary Construction Services ONLY = \$65 (200 amp or less. One location, for less than 1 year.)

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Applicant's Name (print): _____ Signature: _____ Date: _____



BUILDING APPLICATION
Plumbing

For Office Use

Permit Number: _____ Permit Type: New Remodel Addition Basement Finish
Fees Paid: Yes No

1. Property Owner

Name: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Phone & Type: _____ Office Mobile Email: _____
Under Idaho Building Code, a homeowner is allowed to do work on their own home.
Are you a homeowner doing work on your own home? Yes (Skip to #3 and complete the Homeowner's Exemption page)
 No: I am a contractor working for the homeowner No: This property is a Multi-family Residence or Commercial Property.
NOTE: Any contractors/sub-contractors involved will need to submit their own signed applications.

2. Plumbing Contractor

Name: _____ Registration #: _____ Exp.: _____
Address: _____ City: _____ State: _____ Zip Code: _____
Phone & Type: _____ Office Mobile Email: _____
Contact/Rep. Name: _____ Phone: _____ Email: _____
Plumbing Contractor Authorized Signature: _____ **Date:** _____

3. Project Description

Water Meter Quantity: _____ Water Meter Size: _____
Address: _____ -OR- Lot #: ___ Block #: ___ Subdivision: _____
Check one: Single-family Residence Multi-family Residence Commercial
Check one: New Construction* Remodel Addition Basement Finish
Description of work: _____

New Commercial Work: Contracted amount: \$ _____ Calculated Fee (See Below): \$ _____
 Up to \$10,000 = (total cost of system x .02) + \$60 \$10,001-\$100,000 = ((total cost of system -10,000) x .01) + \$260
 Over \$100,001 = ((total cost of system -100,000) x .005) + \$1,160

New Single-Family Residential Work: _____ Sq. Ft.
 Up to 1,500 Sq. Ft. = \$130 1,501-2,500 Sq. Ft. = \$195 2,501-3,500 Sq. Ft. = \$260 3,501-4,500 Sq. Ft. = \$325
 Over 4,500 Sq. Ft. = \$325+(65 x # of additional 1,000 Sq. Ft. (or portion thereof)) \$ _____

New Multi-Family Residential: Duplex = \$260 Three or more units = \$((130 x # of buildings)+(65 x # of units))\$ _____
 Gray Water Systems = \$130 Lawn Sprinklers/Backflow device = \$65 Multipurpose Fire Sprinkler & Domestic Water Supply System = \$65 or \$4 per sprinkler head (whichever is greater)

New work on any other residence and Detached Shops: = \$65 for sewer and water stub connections
Miscellaneous: Sewer Line = \$65 Water Line = \$65 Sewer and Water Line = \$65 Requested inspection = \$65
 Sewer Turnaround (septic to city) = \$65 Hydronic Heating = \$65 + (\$10 x # of manifolds/zones)
 Technical Service = \$65/hour Plan Check = 10% of Contracted Amount

APPLICANT'S SIGNATURE, CERTIFICATION AND AUTHORIZATION: Under penalty of perjury, I hereby certify that I have read this application and state that the information herein is correct and I swear that any information which may hereafter be given by me in hearings before the Planning and Zoning Commission or the City Council for the City of Rexburg shall be truthful and correct. I agree to comply with all City regulations and State laws relating to the subject matter of this application and hereby authorized representatives of the City to enter upon the above-mentioned property for inspections purposes. NOTE: The building official may revoke a permit on approval issued under the provisions of the 2012 International Code in cases of any false statement or misrepresentation of fact in the application or on the plans on which the permit or approval was based. Permit void if not started within 180 days. Permit void if work stops for 180 days.

Applicant's Name (print): _____ Signature: _____ Date: _____



BUILDING APPLICATION
Fire Alarm

For Office Use

Permit Number: _____

Permit approved: Yes No

Fees Paid: Yes No

1. Applicant

Business Name: _____

Office Address: _____ City: _____ State: _____ Zip Code: _____

Office Phone: _____ Contact Person: _____ Cell Phone: _____

Contractor's Authorized Signature: _____ Date: _____

License/Registration # _____ Expiration: _____

2. Location of Work to be Done

Street Address: _____ City: _____ State: _____ Zip Code: _____

Business Name: _____

Contact/Rep. Name: _____ Phone: _____ Office Cell Phone

Email: _____

Dates for work to be done: From _____ to _____

3. New Construction Contracted Amount: \$ _____ Calculated Fee (See Below): \$ _____

Up to \$10,000 = (total cost of system x .02) + \$60 \$10,001-\$100,000 = ((total cost of system -10,000) x .01) + \$260

Over \$100,001 = ((total cost of system -100,000) x .005) + \$1,160

4. Miscellaneous

Plan Review = 10% of Contracted Amount

Re-Inspection = \$65

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Applicant's Name (print): _____ Signature: _____ Date: _____



BUILDING APPLICATION
Fire Sprinkler

For Office Use

Permit Number: _____

Permit approved: Yes No

Fees Paid: Yes No

1. Applicant

Business Name: _____

Office Address: _____ City: _____ State: _____ Zip Code: _____

Office Phone: _____ Contact Person: _____ Cell Phone: _____

Contractor's Authorized Signature: _____ Date: _____

License/Registration # _____ Expiration: _____

2. Location of Work to be Done

Street Address: _____ City: _____ State: _____ Zip Code: _____

Business Name: _____

Contact/Rep. Name: _____ Phone: _____ Office Cell Phone

Email: _____

Dates for work to be done: From _____ to _____

3. New Construction Contracted Amount: \$ _____ Calculated Fee (See Below): \$ _____

Up to \$10,000 = (total cost of system x .02) + \$60 \$10,001-\$100,000 = ((total cost of system -10,000) x .01) + \$260

Over \$100,001 = ((total cost of system -100,000) x .005) + \$1,160

4. Miscellaneous

New Construction = \$1 per sprinkler head (\$2,000 max) # of heads: _____

Existing Inspection Base = \$65

Plan Review = 10% of Contracted Amount

Re-Inspection = \$65

APPLICANT'S SIGNATURE, CERTIFICATION AND AUTHORIZATION: Under penalty of perjury, I hereby certify that I have read this application and state that the information herein correct and I swear that any information which may hereafter be given by me in hearings before the Planning and Zoning Commission or the City Council for the City of Rexburg shall be truthful and correct. I agree to comply with all City regulations and State laws relating to the subject matter of this application and hereby authorized representatives of the City to enter upon the above-mentioned property for inspections purposes. NOTE: The building official may revoke a permit on approval issued under the provisions of the 2012 International Code in cases of any false statement or misrepresentation of fact in the application or on the plans on which the permit or approval was based. Permit void if not started within 180 days. Permit void if work stops for 180 days.

Applicant's Name (print): _____ Signature: _____ Date: _____



Subcontractor List

Excavation & Earthwork: _____

Concrete: _____

Masonry: _____

Roofing: _____

Insulation: _____

Drywall: _____

Painting: _____

Floor Coverings: _____

Plumbing: _____

Heating: _____

Electrical: _____

Special Construction (Manufacturer or Supplier)

Roof Trusses: _____

Floor/Ceiling Joists: _____

Siding/Exterior Trim: _____

Other: _____



BUSINESS USE SUMMARY

The following questions will help speed the review process along. Please take the time to answer all of them.

Is this business occupying an existing building? Yes No

Will the business be doing any structural/or remodeling changes to the building? Yes No

Any changes to the electrical? Yes No

Any changes to the plumbing? Yes No

Any changes to the mechanical system? Yes No

Is the business type changing? Yes, it will change to _____ No

Is this business changing ownership? Yes No

Is the business registered with the City of Rexburg? Yes, License #: _____ No

***If No, please apply for a business license with the Customer Service Dept.**

Will the business have food preparations? Yes No

Will there be any cooking of foods? Yes No

Will there be any deep fat frying? Yes No

Will you have food disposal on site? Yes No

Will there be sumps or floor drains in the facility? Yes No

Will the business have any chemicals on site? Yes No

Applicants Signature

Phone

Date

I certify that the information that I have provided above is to the best of my knowledge accurate and true.