

BUILDING PERMIT APPLICATION

City of Genesee

BP #

Job Address:							
Assessor's Parcel Number: 1. T: R: S: Parcel #:							
2.	OWNER: Mailing Address:						
	Phone Num	ıber:		Email Address:			
3.	CONTRACTOR: Mailing Ad			dress:		License Number:	
	Phone Number:			Email Address:			
4.	ARCHITECT/ENGINEER: Mailing Ad		Mailing Ac	dress:		License Number:	
4.	Phone Number:			Email Address:			
5.	Use of Building (For this Permit):						
5.							
6.	6. Class of Work:						
7.	Describe Work: Valuation of Work:						
	AL CONDITIC	DNS:					
COMPLIANCE WITH ALL ASPECTS OF THE INTERNATIONAL MECHANICAL, FUEL GAS, AND ENERGY CODES IS REQUIRED IN LATAH COUNTY PERMIT FEES							
APPLICATION PLANS CHECKED ISSUED BY: ACCEPTED BY: BY:			ISSUED BY:	Description of Equipment	Qty Each	Total S	
NOTICE: THE PERMIT APPLIED FOR WITH THIS APPLICATION BECOMES NULL AND VOID IF NO INSPECTION IS REQUESTED AND PERFORMED FOR THE WORK AUTHORIZED WITHIN 180 DAYS FROM DATE OF ISSUANCE, AND/OR IF NO INSPECTION IS REQUESTED AND PERFORMED FOR A PERIOD OF 180 DAYS FROM THE MOST RECENT INSPECTION. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.				Residential Furnace including vents/ducts	20.00		
				Residential Boilers	20.00		
				Suspended, wall, floor mount or radiant heater	15.00		
				Ground Loop Heat Pump or Hydronic Piping	15.00		
				Gas Appliances:(dryer, range, water heater, barbecue, log lighter, fireplace, inserts, pool/spa heater, other)	15.00		
				Air-Handlers (electric furnace)	15.00		
				Heat pump, Air Conditioner, Evaporative Cooler	15.00		
				Heat Recovery Unit	15.00		
				Solid Fuel Fireplaces, Stoves, Inserts	25.00		
				Chimney (flue, liner, vent)	15.00		
CONS	SIKUCIION.			Ductwork	15.00		
				Appliance Vents	15.00		
Signature of Contractor or Authorized Agent (Date) OR			t (Date)	Gas Piping System. 1-4 outlets	10.00		
				Each additional outlet over 4	2.00		
				Other (non-specified equipment	15.00		
				Special inspection per hour	50.00		
Signatu	are of Owner (If	Owner is doing the v	vork) (Date)				
				PERMIT Processing Fee		25.00	
				TOTAL FEE (Minimum \$50)			