



CITY OF DOVER - BUILDING AND PLANNING DEPT.

Street address: 699 Lakeshore Ave. Dover - Mailing address: P.O. 115, Dover Idaho 83825 - (208) 265-8339 (PHONE) (208) 265-9035 (FAX)
www.cityofdover.id.gov (web page)

BUILDING PERMIT APPLICATION

Received:	Dover Permit #
	State Permit #

LANDOWNER/PROPERTY INFORMATION:

Landowner	Phone #	Email	
Mailing Address	Site Address		
Subdivision Name	Lot #	Block #	
Section	Township	Range	Acres
Contractor	Registration #	Phone #	
Contractor Address	Email		

DESCRIPTION OF THE PROPOSED WORK:

CLASS OF WORK	<input type="checkbox"/> New	<input type="checkbox"/> Addition	<input type="checkbox"/> Remodel	<input type="checkbox"/> Change of Use	<input type="checkbox"/> Other:
TYPE OF USE/WORK	<input type="checkbox"/> Single-family dwelling	<input type="checkbox"/> Duplex	<input type="checkbox"/> Multi-family dwelling	<input type="checkbox"/> Garage/shop/shed	<input type="checkbox"/> Other:
STRUCTURE DETAIL	# Stories:	Heating:	Utility Provider:		
	1 st Floor sq. ft.	2 nd Floor sq. ft.	Other floors:		
	Attached Garage sq. ft.	Detached Garage sq. ft.			
	Deck sq. ft.	Other:			

OWNER/REPRESENTATIVE STATEMENT & NOTICE:

NOTICE: SEPARATE STATE PERMITS ARE REQUIRED FOR ELECTRICAL, MECHANICAL, AND PLUMBING. THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS OF ISSUANCE, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK COMMENCES UNLESS WRITTEN APPROVAL FOR AN EXTENSION IS GRANTED BY THE CITY. NO CHANGES TO THE SUBMITTED PLANS OR ADDITIONAL WORK IS PERMITTED WITHOUT PRIOR WRITTEN APPROVAL FROM THE CITY.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THE APPLICATION AND CONFIRM THAT ALL STATEMENTS, DRAWINGS, AND DEPICTIONS ARE TRUE AND ACCURATE. ALL PROVISIONS OF LOCAL, STATE, AND FEDERAL LAWS GOVERNING THIS WORK WILL BE COMPLIED WITH, WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF THIS PERMIT DOES NOT GIVE AUTHORITY TO VIOLATE OR CANCEL OTHER LOCAL, STATE, OR FEDERAL LAWS REGULATING CONSTRUCTION OR PERFORMANCE OF CONSTRUCTION. I FURTHER CERTIFY THAT THE CONSTRUCTION WILL CONFORM TO THE DIMENSIONS AND USES SHOWN.

I HEREBY GRANT PERMISSION TO THE CITY AND ITS REPRESENTATIVES TO ENTER THE SUBJECT PROPERTY TO CONDUCT INSPECTIONS RELATIVE TO THIS APPLICATION.

Signature of Landowner/Authorized Agent

Printed Name

Date

TO BE COMPLETED BY CITY:

Parcel #	Zone District	Floodplain	Panel #	Development Permit #
Zoning Approval:	Fire Approval:	Sewer Approval:	Water Approval:	
Permit Fee:	Plan Check Fee:	City Initial Fees:	Stormwater:	
Total Fees:	Total Owing Upon Issuance:	Date Fees Received:	By:	
Date Application Received/By:	Plans Checked:	Date Approved:	Date Issued:	

CONDITIONS OF APPROVAL: