

**ELMORE COUNTY ZONING PERMIT APPLICATION**

**Zoning Permit Fee \$50.00 Plus any applicable fees.**

**We are unable to accept facsimile copies. Please complete in INK.**

Growth and Development Department Only

Date Application Submitted: \_\_\_\_\_ Building Permit: \_\_\_\_\_

Accepted by: \_\_\_\_\_ Receipt #: \_\_\_\_\_

Power Release Permit: \_\_\_\_\_ Other Requirements: \_\_\_\_\_

**Zoning Application Purpose:** \_\_\_\_\_

1. **Property Owner's Name:** \_\_\_\_\_

2. Mailing Address of Property owner: \_\_\_\_\_ Phone # \_\_\_\_\_

3. Site Address \_\_\_\_\_

4. **Applicant's Name**, address, and telephone number \_\_\_\_\_

5. Applicant's e-mail address \_\_\_\_\_

6. **Contractor Registration Number** \_\_\_\_\_

**Required by Idaho Contractor Registration Act January 1, 2006**

7. Location of Property: Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ Quarter \_\_\_\_\_

Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Total acreage of property site: \_\_\_\_\_ Current Zoning: \_\_\_\_\_ Parcel # RP \_\_\_\_\_

8. Legal lot verified by:  Platted Sub  Administrative Parcel Split  LOI  Existing Parcel in 1999

Copy of deed  Yes  No Assessor's Parcel Master Inquiry:  Yes  No

9. Structures existing on property: \_\_\_\_\_

10. Proposed Structures: \_\_\_\_\_

**Required Minimum Setbacks:** Street Front \_\_\_\_\_ Side (street side) \_\_\_\_\_ Side (interior) \_\_\_\_\_ Rear \_\_\_\_\_

**\* Front setback measured from the road right-of-way**

11. **Proposed Setbacks:** Street Front \_\_\_\_\_ Side (street side) \_\_\_\_\_ Side (interior) \_\_\_\_\_ Rear \_\_\_\_\_

12. Is the site within the:  Mountain Home Area of City Impact,  Glens Ferry Area of City Impact,  Community Development Overlay (CDO),  Airport Hazard Zone, or  an Area of Critical Concern (ACC)?

13. Property In Floodplain?  Yes  No Flood Insurance Rate Map # \_\_\_\_\_

14. FEMA Elevation Certificate and Flood Plain Development Application Attached  Yes  No

**Manufactured Home?**  Yes  No Year Manufactured Home Constructed? \_\_\_\_\_

a. If manufactured prior to June 15, 1976  
Division of Building Safety Rehabilitation Compliance Certificate Provided  Yes

b. Is Manufactured Home currently in Elmore County or is it to be moved to Elmore County?  Yes  No  
All Manufactured Home Permits require Elmore County Assessor signature.

**Other Permits Required:**

**Circle Any Other Permits That May Be Required**

- Idaho State Electrical      Idaho State Plumbing      Highway District Approach Permit
- Department of Environmental Quality      Environmental Protection Agency      Central District Health Department
- Idaho Department of Water Resources      Federal Aviation Agency Other \_\_\_\_\_

NONE

**Building Permit Requirements**

- Two (2) set of Building Plans**
- Make sure to bring RES Check-For Residential Plans**

**Site Plan**, drawn to a professional standard and to scale showing the following:

- Parcel dimensions
- Location and setbacks of the existing buildings, proposed buildings and/or additions/alterations.
- Proposed and existing driveways, easements, and waterways;
- Proposed and existing building heights

**The owner and/or applicant affirms: (1) This application is completed in its entirety to include all required information and the information contained herein is true and correct as of the date it is received in the Growth and Development Department (2) If the site is within the Pine Featherville area there will be no construction waste dumping at the County waste transfer facility (3) If there is a hillside involved in development (10% or greater grade to building envelope) there can be little to no gouging of hillside without plans submitted by a licensed engineer. (4) The property owner is responsible for obtaining any other required permit applicable to this project. (5) If the property is in a subdivision, the property owner is responsible for complying with any existing Conditions, Covenants, and Restrictions (CC&Rs). (6) An approved zoning permit is valid for one year after approval date. Upon written request the Commission may grant an extension.**

Property Owner's Signature (Required)	Date	Applicant's Signature (Required)	Date
---------------------------------------	------	----------------------------------	------

**Agency Approvals**

Central District Health (or other Sewer District) Sewer Permit Approval	Date
---	------

Comment: \_\_\_\_\_

Roadway Jurisdiction Project Approval	Initial	Date
---------------------------------------	---------	------

Comment: \_\_\_\_\_

Assessor's Office (Verify Legal Description OR Tax Status If Manufactured Home)	Initial	Date
---	---------	------

Comment: \_\_\_\_\_

Fire District Approval	Initial	Date
------------------------	---------	------

Comment: \_\_\_\_\_

This application is:       Approved       Approved pending approval of other permit       Denied

Remarks: \_\_\_\_\_

Approval of Planning and Zoning Authority	Date: _____
---	-------------