



City of Idaho Falls  
Building Department

## Commercial Building Permit Application

Date Applied: \_\_\_\_\_ Project Address: \_\_\_\_\_

Project Name: \_\_\_\_\_ Total Valuation: \_\_\_\_\_

County Parcel # RPA: \_\_\_\_\_ (If metes & Bounds Legal Description Attached)

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Idaho State Contractor Registration#: \_\_\_\_\_

General Contractor: \_\_\_\_\_ City License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Electrical Contractor: \_\_\_\_\_ State License #: \_\_\_\_\_ Contract Amount: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ City License #: \_\_\_\_\_ Contract Amount: \_\_\_\_\_

Mechanical Contractor: \_\_\_\_\_ State License #: \_\_\_\_\_ Contract Amount: \_\_\_\_\_

Project Type: \_\_\_\_\_  Sq. Footage: \_\_\_\_\_ Project Type: \_\_\_\_\_  Sq. Footage: \_\_\_\_\_

Project Type: \_\_\_\_\_  Sq. Footage: \_\_\_\_\_ Project Type: \_\_\_\_\_  Sq. Footage: \_\_\_\_\_

**Temporary Construction Power Requested** Temporary power with existing transformer (\$150.00) (Y/N)

Temporary power with temporary transformer (\$750.00) (Y/N)

**Declaration: Applicant hereby certifies that the information contained in the application is true and correct.**

Owner or Owner's Authorized Agent or Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

Building Permit Number: \_\_\_\_\_  
Electrical Permit Number: \_\_\_\_\_  
Plumbing Permit Number: \_\_\_\_\_  
Mechanical Permit Number: \_\_\_\_\_  
Fire Permit Number: \_\_\_\_\_  
Sewer/Water Permit Number: \_\_\_\_\_