



City of Roberts, Idaho

Building Permit Application

208-228-3220

Date: _____ Zoning: _____ RPD #: _____

Property & Project Information

Site Address: _____

Legal Description: _____

Proposed Use: _____

Project Description: _____

Owner / Applicant Information

Name: _____ Phone: _____

Email: _____

Mailing Address: _____

Project Details

Type: _____

Estimated Cost: \$ _____

Start Date: _____

Expected Completion Date: _____

Site & Building Information (Required)

Building Height: _____ # of Dwelling Units: _____

Off-Street Parking Spaces Provided: _____

Contractor Information (All Contractors)

Complete all applicable sections. Attach additional pages if needed.

Owner-Builder

General Contractor

Name: _____ License #: _____

Company: _____ Phone: _____

Email: _____

Bond Company: _____ Bond Amount: _____

Electrical

Name: _____ License #: _____

Company: _____ Phone: _____

Bond Company: _____ Bond Amount: _____

Plumbing

Name: _____ License #: _____

Company: _____ Phone: _____

Bond Company: _____ Bond Amount: _____

HVAC

Name: _____ License #: _____

Company: _____ Phone: _____

Bond Company: _____ Bond Amount: _____

Concrete / Foundation

Name: _____ License #: _____

Company: _____ Phone: _____

Bond Company: _____ Bond Amount: _____

Framing

Name: _____ License #: _____

Company: _____ Phone: _____

Bond Company: _____ Bond Amount: _____

Roofing

Name: _____ License #: _____

Company: _____ Phone: _____

Bond Company: _____ Bond Amount: _____

Excavation / Grading

Name: _____ License #: _____

Company: _____ Phone: _____

Bond Company: _____ Bond Amount: _____

Other: _____

Name: _____ License #: _____

Company: _____ Phone: _____

Bond Company: _____ Bond Amount: _____

Additional contractors attached

UTILITIES (CITY REQUIRED CONNECTIONS)

Water Connection (meter/service location): _____

New connection required Existing connection verified

Sewer Connection (lateral/cleanout location): _____

New connection required Existing connection (active/verified) Existing connection (inactive)

Power Pole Location (existing or proposed connection point): _____

New connection required Existing connection (active/verified)

Requirement: Existing water and sewer connections must have been active or in use within the last ten (10) years. Connections not used within 10 years may require replacement or upgrade at applicant expense, subject to City approval.

Scaled Site Plan Attached (Required)

REQUIRED DOCUMENTS CHECKLIST

Completed Application Form

Proof of Ownership or Authorization

Scaled Residential Site Plan (Required)

Contractor Licenses & Bonding Information

Building Plans/Drawings (including height & layout)

Additional Documents: _____

SITE PLAN STANDARDS (RESIDENTIAL ONLY)

The site plan must be drawn to scale and clearly show:

Structures

- Existing and proposed buildings
- Dimensions of all structures
- Distance between structures
- Structure heights

Property Information

- Property boundaries and lot dimensions
- Setbacks (front, side, rear)
- North arrow and street names

Access & Parking (REQUIRED)

- Driveways and street access
- All required off-street parking spaces
- Parking surface layout
- No parking within fifteen (15) feet of any fire hydrant

Fire Protection

- All existing fire hydrants within or adjacent to the property must be shown

Utilities & Infrastructure

- Water connection location (city system only)
- Water control valve installed as close to the meter as possible. (Required)
- Sewer connection location (city system only)
- Existing or new power pole locations along property frontage and service connection points must be shown

Public Improvements

- Sidewalk
- Curb
- Gutter
- Storm Drainage

SUBMISSION REQUIREMENTS & CONDITIONS

- Must be legible and drawn to scale
- Incomplete applications will not be accepted or processed
- All required items must be shown before review begins
- Must comply with all City and State codes
- State permits required for Electrical, Plumbing, and HVAC
- Call 811 before digging
- Construction must begin within 180 days of approval and may be revoked if not started or substantially completed within 180 days
- City of Roberts building and development code available at: <https://cityofrobertsidaho.gov>

Certification

I certify that the information provided is true and accurate. I agree to comply with all City of Roberts ordinances and applicable state laws.

Applicants Signature: _____ Date: _____

OFFICE USE ONLY		
<input type="checkbox"/> Application Complete	<input type="checkbox"/> Site Plan Verified	<input type="checkbox"/> Building Plans Verified
<input type="checkbox"/> Zoning Verified	<input type="checkbox"/> Setbacks Verified	<input type="checkbox"/> Parking Verified
<input type="checkbox"/> Fire Hydrants Verified	<input type="checkbox"/> Utilities Verified (Water/Sewer/Power)	
<input type="checkbox"/> 15-ft Fire Hydrant Clearance Verified		

PERMIT ACTION

Mayor: Y / N Council Date: _____ Start By: _____ Exp By: _____

Approved Denied Approved with Conditions Permit Number Issued: _____

City Officials Signature: _____ Date: _____

If Approved with Conditions (if applicable)

If Denied

Denial Reason(s):

Required Corrections / Notes for Reapplication:
