

CITY OF COEUR D'ALENE Project Review Application

PLEASE SUBMIT ELECTRONICALLY AS A PDF

MEETING INFORMATION	
DATE:	
TIME:	
LOCATION:	

Property Information Street Address			
0:		#	Full-time 7-win w
Size of lot	acres, and/or	sq. π.	Existing Zoning
Applicant Name			E-Mail
Address			Phone
Contact Person			Phone
			E-Mail
Filing Capacity			
☐ Property Owner	☐ Prospective Purchaser	□ Lessee □	☐Authorized Agent
Engineer or Architect			
Name			_ E-Mail
Address			Phone
Contact Person			Phone
			E-Mail
Proposed Use			
Please describe the o	concept of the proposed projec	ct	
Building Square Foot	age (total for each building)	Estimated C	Cost of Construction (total for each building)
Building Square 1 50th	age (total for odol) building)		Il material and labor)
Does this project re	quire a water or sewer MAIN	extension?	□YES □NO □Don't Know

A preconstruction meeting may be required for this project based on the information submitted. That determination will be made at project review meeting.

NOTE: The State Department of Environmental Quality (DEQ) has review authority on expansions to public water, sewer, and stormwater systems, i.e. lift stations, booster stations, water storage facilities, and above ground treatment facilities. Please contact DEQ if you have any questions regarding these projects and DEQ's processes at 2110 N. Ironwood Parkway, Coeur d'Alene ID, 83814 (208)769-1422.



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Project Information ☐ Site plan and floor plan must be in PDF format. ☐ Building code analysis required, either on the drawings or by separate attachment. (Code analysis required if this submittal is from a design professional) ☐ Previous use(s) of the building **Required Site Plan Information** Show all of the following ☐ all structures on site ☐ all lot lines ☐ all rights-of-way ☐ all other structure's current use ☐ dimensions to all property lines and any other structures on the property. ☐ existing sewer unknown □ new sewer - - location and size. \square existing or new water service and water meter(s) - - location and size. ☐ irrigation service and meter(s) - - location and size..... ☐ none ☐ fire line service(s) - - location and size.... ☐ none □ location of any existing trees within rights-of-way.....□ none □ location of any planned business signage on-site.....□ none □ location of any accessible parking spaces.....□ none Required Floor Plan Information Provide for each floor level ☐ building dimensions and interior room areas (sq. ft.) ☐ intended uses of all rooms or areas in the building(s). □ location and size of building exits. □ location of any stairs and/or ramps (both interior and exterior)...... □ none ☐ show existing or new fire sprinklers, fire extinguishers, alarm systems, ☐ if proposing an addition to an existing building, include the existing building dimensions, interior floor plan, number of stories, type of construction, etc. ☐ if a tenant improvement doesn't include the entire building, provide a key plan that shows the location of the proposed work. Please Print Phone Number Completed by Date

Note: We cannot process incomplete applications.



MUNICIPAL SERVICES WORKSHEET EXTERIOR SIGNAGE

Do you plan to install any exterior permanent or temporary signage? \Box Yes \Box No If YES, please complete the following: 1. What is the lineal frontage of your lot on your addressed street? ______ Ft 2. Is the property located on a corner? □Yes □No a. If yes, what is the lineal frontage on the adjoining street? ______ Ft 3. Do you share your parcel with any other businesses? ☐Yes ☐No a. If yes, how many? 4. Are you located in a strip mall? □Yes □No If yes, what is measurement of your space from east to west wall? ______ Ft If yes, what is your measurement of your space from north to south wall? 5. Is your business located on a parcel of more than two acres? □Yes More than 10 acres? □Yes 6. Are you located within 415 feet of the median of I-90 (Freeway) □Yes □No 7. Does your parcel abut Highway 95 at any point? ☐Yes ☐No 8. Do you plan to use any of the following types of signs? Pylon or Pole sign? □Yes □No Dimension _ Monument Sign? □Yes □No Dimension Single Surface Wall Signs? □Yes □No Dimension_____ A Frame/Sandwich Board? □Yes □No Dimension Temporary Banners? □Yes □No Dimension Grand Opening etc. Construction Signs? □Yes □No Dimension Roof or Projecting Sign? Dimension □Yes □No Awnings/Canopies with signage?□Yes □No

Questions on signage or licensing: Kelley Setters ksetters@cdaid.org 208.769.2229

Proposed Location Address:

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BUSINESS LICENSING CHECKLIST

	Yes	No
1. Will alcohol be sold on premises? If no, go to #2		
a. If yes – to go only?		
b. Is premise within 300 ft of playground, school, or church?		
c. Is any part of property within 600 ft of any residential zoning?		
d. Is any part of property within 600 ft of a nursing home or hospital?		
2. Will any Childcare be performed on premise?		
a. If Yes what is maximum number you plan to provide care for?		
b. Does the property contain more than one level?		
3. Do you provide any construction services?		
a. If Yes, Do you have an Idaho Contractors Registration?		
b. Do you provide any excavation services?		
4. Is business proposed from a primary residence?		
5. Do you plan on boarding pets/providing care for pets?		
6. Do you propose any massage or hands on treatments?		
7. Do you plan to perform any security?		
8. Do you use any mobile food carts or outside vending?		
9. Do you plan to utilize any seasonal/outdoor seating?		
10. Do you plan to operate a Mobile Home Park?		
11. Do you plan to sell any secondhand goods/pawn items?		
12. Do you perform any investigative work?		
13. Do you operate any taxi/transportation service?		
14. Do you operate any tree service?		

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Please send	completed	applications to	: cdapermits@c	daid.org
*****PROJECT REVIEW	' FEE: \$350.00 ****	*******	****	