



CITY OF COEUR D'ALENE Project Review Application

PLEASE SUBMIT
ELECTRONICALLY
AS A PDF

MEETING INFORMATION
DATE: _____
TIME: _____
LOCATION: _____

Property Information

Street Address _____

Legal Description of property (see Attached) or/ _____

Size of lot _____ acres, and/or _____ sq. ft. 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 concept of the proposed project

Building Square Footage (total for each building)

Estimated Cost of Construction (total for each building)
(Including all material and labor)

Does this project require 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

- | | |
|---|--|
| <input type="checkbox"/> all structures on site | <input type="checkbox"/> all lot lines |
| <input type="checkbox"/> all rights-of-way | <input type="checkbox"/> all other structure's current use |
| <input type="checkbox"/> dimensions to all property lines and any other structures on the property. | |
| <input type="checkbox"/> existing sewer unknown | <input type="checkbox"/> new sewer - - location and size. |
| <input type="checkbox"/> existing or new water service and water meter(s) - - location and size. | |
| <input type="checkbox"/> irrigation service and meter(s) - - location and size..... | <input type="checkbox"/> none |
| <input type="checkbox"/> fire line service(s) - - location and size..... | <input type="checkbox"/> none |
| <input type="checkbox"/> location of any existing trees within rights-of-way..... | <input type="checkbox"/> none |
| <input type="checkbox"/> location of any planned business signage on-site..... | <input type="checkbox"/> none |
| <input type="checkbox"/> location of any accessible parking spaces..... | <input type="checkbox"/> 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, suppression systems, and knox key boxes..... none currently installed
- 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 _____
Completed by _____ Date _____ Phone Number _____

Note: We cannot process incomplete applications.



MUNICIPAL SERVICES WORKSHEET

EXTERIOR SIGNAGE

Do you plan to install any exterior permanent or temporary signage? Yes 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? _____ Ft

5. Is your business located on a parcel of more than two acres? Yes No

More than 10 acres? Yes No

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? Yes No Dimension _____

Awnings/Canopies with signage? Yes No

Proposed Location Address: _____

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



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@cdaid.org****