



CITY OF COEUR D'ALENE Residential Permit Application

Job Address: N S E W _____ ST AVE DR RD PL LN CIR CT WY LP

Legal Description: LOT _____ BLOCK _____ SUBDIVISION _____ Value of Work \$ _____

Describe work: _____

Type of Work: New Home Addition to Home Interior Remodel Finish Basement New Garage/Shop Accessory dwelling unit (ADU)
 Detached Storage (not a garage or shop) Porch Deck Patio Cover Fire Damage Repair Designated Mfg Home
 Other _____

Total Square Footage (including basement and garage): _____

Description of Lot: Lot on a Hillside (15% or greater) Building in Flood Plain

Owner: _____ Contact Person _____ Phone _____ Fax _____

Address(C/S/Z): _____ E-mail _____

Contractor: _____ Contact Person _____ Phone _____ Fax _____

Address (C/S/Z): _____ E-mail _____

Contractor Registration No. _____ Expiration date: _____

Draftsman/Architect: _____ Contact Person _____ Phone _____ Fax _____

Address (C/S/Z): _____ E-mail _____

Engineer: _____ Contact Person _____ Phone _____ Fax _____

Address (C/S/Z): _____ E-mail _____

I understand that separate electrical, plumbing, and mechanical permits may be required. I understand that homes built on hillsides and in floodplains may require additional design information and may have additional construction requirements.

Owner/Authorized Agent _____ Date _____

Staff to complete:
Submittal Date: _____ Time: _____ Plan Review Fee: _____ Accepted By: _____



CITY OF COEUR D'ALENE Mechanical Permit Application

Use of building: Commercial Residential

Job Address: _____

Owner: _____

Address: _____

City/Zip: _____

Phone: _____

Fax: _____ E-Mail _____

Mech Contractor: _____

Address: _____

City/Zip: _____

Phone: _____ Lic. # _____ Exp Date _____

Fax: _____ E-Mail _____

Describe work:	<input type="checkbox"/> NONE/NO MECHANICAL WORK

- | |
|--|
| Mechanical Requirements: |
| • ACCA Manuals J and D worksheets |
| • Plan showing locations, sizes & specific fittings of system |
| • Manufacturer's data sheets for proposed HVAC appliances |
| • Tutorial available at http://www.acca.org/speedsheet |
| • Software available for purchase at http://www.acca.org/store |
| • ResCheck/ComCheck see www.energycodes.gov/ |

Description of Item	# of items	Fee	Totals
Processing Fee	1	\$ 40	\$ 40
Air Handler < 10,000 CFM		x 14	
Air Handler > 10,000 CFM		x 22	
Ductwork (any)		x 10	
Boiler/Refrig 1-100M BTU		x 18	
Boiler/Refrig 100-500M BTU		x 30	
Boiler/Refrig 501-1000M BTU		x 42	
Boiler/Refrig 1,001-1750M BTU		x 60	
Boiler/Refrig > 1750M BTU		x 100	
Clothes Dryer		x 18	
Electric Furnace		x 18	
Evaporative Coolers		x 14	
Gas Equipment < 100,000 BTU (Gas furnace, Generator)		x 18	
Gas Equipment > 100,000 BTU		x 22	
Gas Log		x 18	
Gas Piping (each outlet)		x 4	
Heat Pump & A/C 0-3 tons		x 18	
Heat Pump & A/C 4-15 tons		x 32	
Heat Pump & A/C 16-30 tons		x 42	
Heat Pump & A/C 31-50 tons		x 60	
Heat Pump & A/C > 50 tons		x 100	
Mini-Split (# of heads)		x 8	
Miscellaneous (not covered elsewhere)		x 28	
Manufactured Home Gas Hook-up		x 18	
Range (Gas)		x 18	
Type I Hood (per foot)		x 10	
Type II Hood (Typical Residential)		x 14	
VAV Units/Duct Heater		x 10	
Ventilating Fans		x 10	
Gas Insert		x 22	
Fireplace Insert		x 22	
Woodstove		x 22	
Gas Water Heater			
Specialty Plumbing Contractor Lic. #: _____		x 18	
Plan Review Fee (internal use only)			

Signature _____ Date _____

TOTAL PERMIT FEE \$ _____



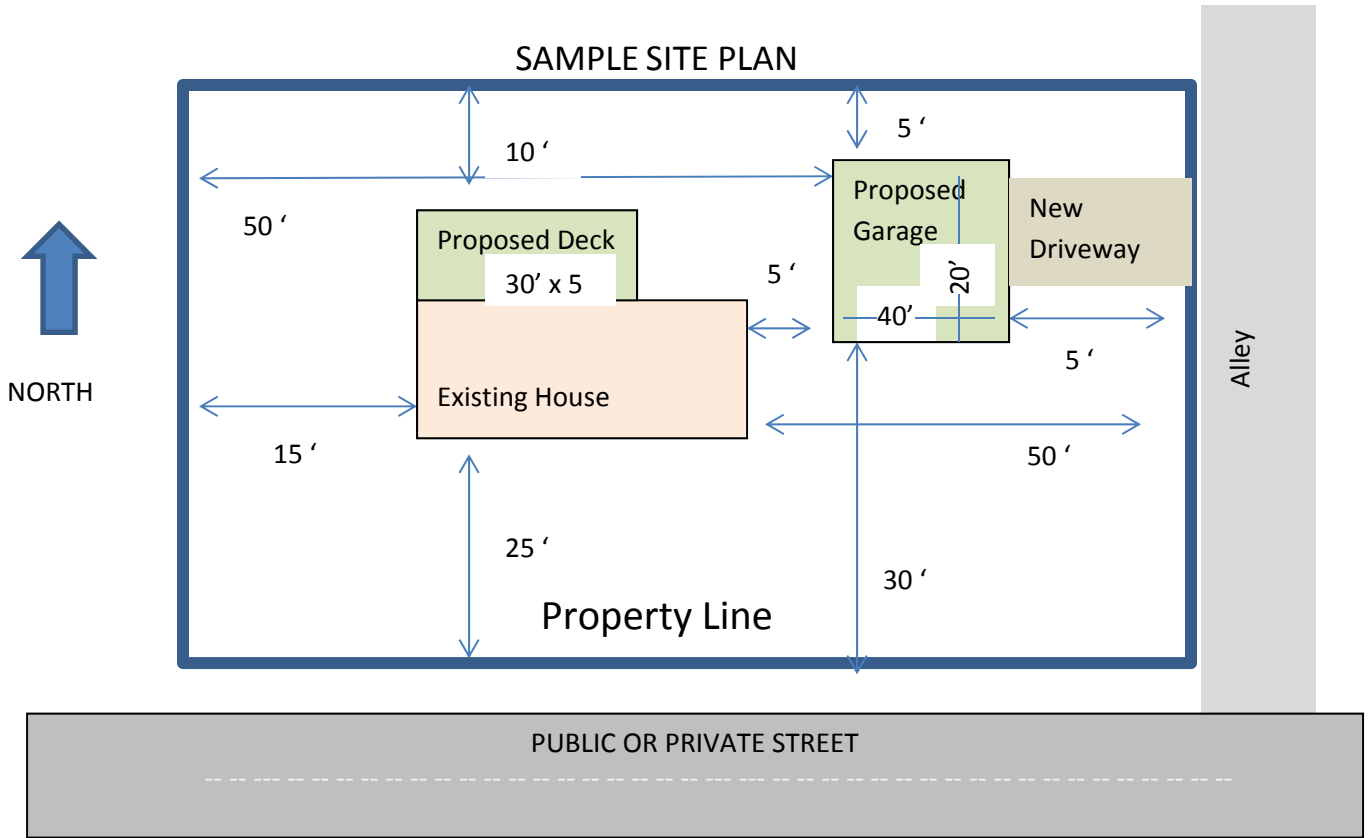
CITY OF COEUR D'ALENE Residential Plan Submittal Minimums

- 1. A plan review fee based on the value of the job is due in the form of cash or check at the time of permit submittal.
- 2. Submittals are required to be an electronic PDF file.
- 3. Building and Mechanical applications must be fully completed.
- 4. Site plan.
 - A drawing representation of the property line, structure(s) on the property and the distance from all structures to the property lines. Distance between structures should also be included. Distinguish between existing and proposed structures and driveways or approaches.
 - North Arrow for bearings.
- 5. Floor Plan for each level of the house including the garage. Identify each room.
 - Show smoke detector locations. One smoke detector is required in each bedroom, outside each sleeping area and at least 1 per level of the house. Interconnection required.
 - Show carbon monoxide detector locations. One shall be installed outside of each sleeping area in the immediate vicinity of the bedrooms. Interconnection required.
- 6. The height of any proposed buildings or accessory structures from grade to peak is required to be reflected on the plan.
- 7. Plan details. The details should be complete enough for the plans examiner to be able to look at your plan and perform the construction of the project. Details would include such items as elevations, roof plan, framing plans, spacing, joist hangers, joist size and spacing, flashing, ledgers, beam size and type.
- 8. Zoning: R-1 R-3 R-5 R-8 R-12 R-17 MH-8 DC PUD: _____
Infill overlay district: DO-N DO-E MO Hillside
- 9. All headers and beams location including type, size and connections.
- 10. Foundation plan with cross sections of footings, pads, wall reinforcement, anchor bolts, hold downs and sill plates. Include deck and patio details.
- 11. Floor framing details. Show beams, joists type, size, spacing and installation details.
- 12. Roof framing plan and details or truss layout and datasheets, include over-framing details.
- 13. Furnace and hot water heater location.
- 14. Egress windows. Provide at least one egress window in every bedroom and at least one on each level.
- 15. All braced wall panel types. Show locations and details of installation, including engineered design.
- 16. Shear / Braced Wall Plan.
- 17. Attic access. Should be 22"x30" (not allowed in closets smaller than 5' x 7')
- 18. Crawl space access. Should be 18" x 24" min (22"x30" min if access to mechanical equipment)
- 19. One-hour fire resistive separation detail between house and garage.
- 20. **Energy Calculations (PDF 2018 IECC):** Including percentage of glazing, U-factor of windows, R-values of basement, slab, crawl, floors, exterior walls and ceilings. Website: www.energycodes.gov Tech support: techsupport@becp.pnl.gov

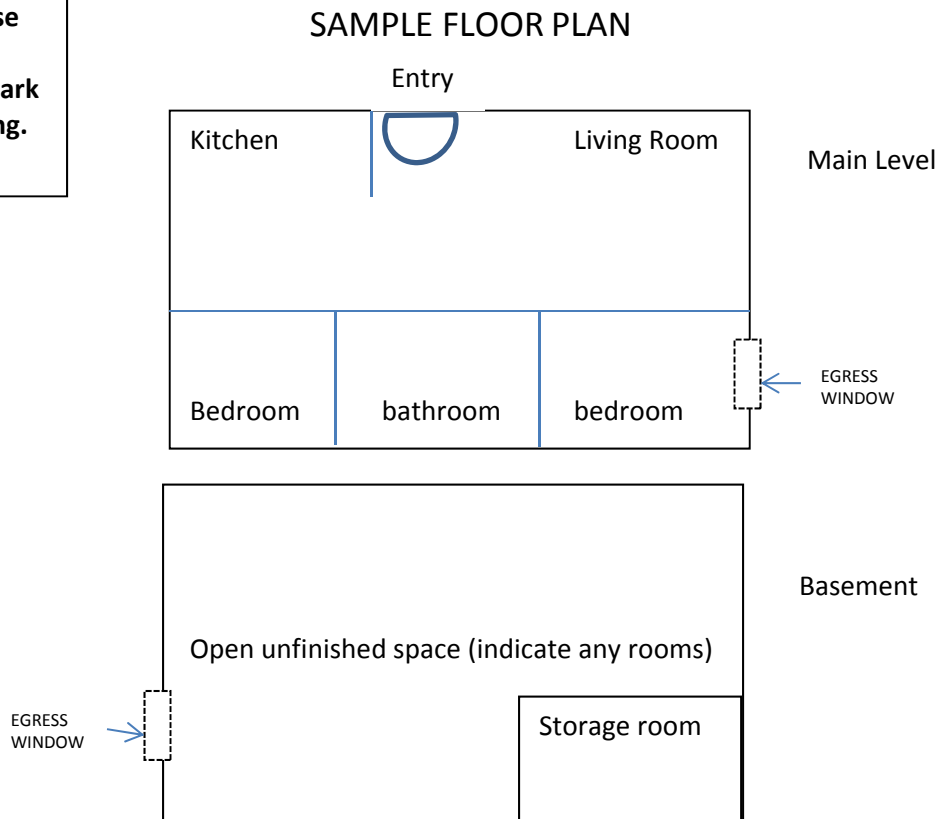
I acknowledge all the submittal minimums marked above are included either on the drawings or with the application for plan review.

Completed By

Date



The Site Plan and/or Floor Plan can be hand drawn. Please make sure if using pencil, the line is dark enough for scanning.





CITY OF COEUR D'ALENE Residential HVAC System Design Form

Building Permit No. _____

Please COMPLETE "ALL" Fields Below
(For new dwellings submitted for building permits
after 01-01-2010)

DESIGNATED CONTACT PERSON

Name: _____
Phone: _____ Cell: _____
E-mail: _____

Mechanical Contractor: _____

License Number: _____

Phone Number: _____

E-mail: _____

Job Address: _____

REQUIRED ATTACHMENTS

ATTACHED

- | | | |
|---|-----|--------------------------|
| 1. Manufacturer's Performance Data Sheets | Yes | <input type="checkbox"/> |
| 2. Manual D Worksheets | Yes | <input type="checkbox"/> |
| 3. Duct Distribution Line Drawing | Yes | <input type="checkbox"/> |
| 4. Choose one (1) of the following: | | |
| a) Manual J1 Form & Worksheets | Yes | <input type="checkbox"/> |
| b) MJ1AE Form & Worksheets* | Yes | <input type="checkbox"/> |
| c) Other Approved Form & Worksheets | Yes | <input type="checkbox"/> |

HVAC LOAD CALCULATIONS (from worksheet; Per 2018 IRC M1401.3)

Design Conditions:

Winter Design Conditions:

Outdoor Temperature _____
Indoor Temperature _____
Total Heat Loss _____ btu

Summer Design Conditions:

Outdoor Temperature _____
Indoor Temperature _____
Latent Heat Gain _____
Total Heat Gain _____ btu

Building Construction Information:

Building:

Number of Bedrooms _____
Conditioned Floor Area _____ sq ft
Number of Occupants _____ bedrooms + 1

Windows:

Eave Overhang Depth _____ ft
U - Factor _____

Skylights: _____

Direction Orientation of Front Door: _____

HVAC EQUIPMENT SELECTION (Per 2018 IRC M1401.3)

Heating Equipment Data:

Equipment Type _____
Manufacturer _____
Model Number _____
Heating Capacity _____

Cooling Equipment Data:

Equipment Type _____
Manufacturer _____
Model Number _____
Cooling Capacity _____

Blower Data:

Heating cfm _____
Cooling cfm _____
Static Pressure _____

HVAC DUCT DISTRIBUTION DESIGN (Per 2018 IRC M1601.1)

Design Airflow _____	Longest Supply Run _____	Trunk Type (circle 1):	Branch Type (circle 1):
External Static Pressure _____	Longest Return Run _____	duct board, flex,	duct board, flex,
Pressure Losses _____	Total Effective Length _____	sheet metal, other:	sheet metal, other:
Available Static Pressure _____	Friction Rate _____		
(Available Static Pressure = ESP-CP)		(Friction Rate = ASP x 100 / TEL)	

The load calculations, equipment selection, and duct system design were performed based on the plans as submitted for a Building Permit. The system will be installed in the field per the approved equipment and duct design.

CONTRACTOR (Please Print) _____

Contractor Signature: _____ Date _____

* If Home qualifies for MJ1AE form base on Abridged Edition Checklist



CITY OF COEUR D'ALENE Street Tree Requirements

New Construction

City ordinances require the planting of one street tree per street frontage for new construction of duplexes and single-family dwellings. Note that corner lots would require two street trees—one per frontage.

A \$300 fee per street frontage will be collected when a building permit is issued.

A request for a refund of the \$300 fee can be submitted when one of the following conditions have been met:

1. Retention of existing trees within the right-of-way;
2. Purchase and planting of one street per frontage at time of application of Certificate of Occupancy;
3. Purchase and planting of a street tree(s) within 6 months of issuance of Certificate of Occupancy.

The attached brochure outlines the ordinance requirement, provides information on selecting and planting trees, and includes an application for a refund of the fee.

The following information is needed for your property:

Property Address or Parcel Number:

Number of frontages _____

Signature:

Date: _____

Application for Refund

*Contractors or homeowners can apply for refund at the time of application for Certificate of Occupancy. **Homeowners have six months after issuance of a C.O., to apply for a refund.***

Property Location / Address

Refund to be mailed to:

Contractor (*name & address*)

Homeowner (*name & address*)

Signature _____

Date _____

Submit to:

City of Coeur d'Alene
Attn: Urban Forestry
710 E. Mullan Avenue
Coeur d'Alene, ID 83814

For questions related to Urban Forestry, please contact Nick Goodwin at (208) 769-2266.



BUILDING PERMIT ADDENDUM – CONTRACTOR REGISTRATION EXEMPTION DECLARATION

Effective immediately the City of Coeur d'Alene **will not accept a building permit application** unless the applicant provides proof of contractor registration as required by Idaho Code 54-5209 or is exempt from the registration requirement.

This requirement can be satisfied in one of the following ways:

- Enter your current Idaho Contractor's Registration number and expiration date on the face of the application and attach a copy of your registration card or other documentation from the Contractor Board establishing that you are currently registered.
- Complete the following addendum by indicating that you are exempt from the registration as provided by Idaho Code 54- 5205. **In order to complete the addendum you must identify the basis for your exempt status including a reference to the Idaho Code subsection creating the exemption.**

I certify, under penalty of perjury, that I am exempt from the contractor registration requirement of I.C. 54-5209. I am exempt because _____, which is established as an exemption by I. C. 54-5205 _____.

I understand that acting in the capacity of a contractor within the meaning of Idaho Code Chapter 54 Title 52 without a current registration with the Idaho Bureau of Occupation Licenses or without being exempt as defined by Idaho Code 54-5205, is a misdemeanor punishable by a fine not to exceed one thousand dollars (\$1,000) or by imprisonment in the county jail for a term not to exceed six months, or both.

Name: (Please Print) _____

Signature: _____ Date: _____