PDS Online | eApply
City of Boise • Planning & Development Services • (208) 384-3830 • www.cityofboise org/pds

#502: New Commercial/Commercial Additions

Property Information	nago at a stigate in magazine the about a consequence of the consequen			В	1012-009
Address			and the second of the second o		""
Street Number: 800	Prefix:	Street Name: MAIN ST		HALLE STANDARD STANDA	
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Subdivision name: R/W ADJ SE'LY	Block:	Lot: 0	Section:	Township:	Range:
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Parcel Number: R1013000106	Additional	Parcel Numbers:		· · ·	
11101000100					
Primary Contact	5 667 E 55 - No. 11 - No. 11 - No. 11				
Who is responsible for receiving e-mails, uploa			akan wakan kanana manaka City?	BOTE BARTHAR FOR SECTION OF STREET THE VIEW FOR	ina dikelaruh Muzuli. Melaken
C Applicative C Application		J	•		
	L				
Applicant Information					
	**************************************	 Monte Constituting and the original report goes makes 	eninen ministration of the control o		or or the section of
First Name:	Last Name:				
Tom	Alhquist Sr				
Company:		veninning - April - Ap	1		
Gardner Company					
Address:	City:		State:	Zij	·
850 W. Main Street	Boise		ID .	83	3702
-mail:	Phone Number:	- comi i minimo tilico de dicini kalcuna talcuni ki	Cell:	Fa	X:
om@gardnercompany.net	(208) 246-890)9	(801) 560-	7828	
gent/Representative Informatio irst Name:	Last Name:			endino de donim o r este sincido este considera con es	en da ekalen kun nedyk kin ekal
Jason	Butler				
Company:	THEOD. SHRIPE	CONTRACTICUE			
CTA Inc					
ddress:	City:		State:	Zip	
1185 Grove Street	Boise		ID	83	3702
-mail:	Phone Number:	PERSON CONTROL OF THE PERSON O	Cell:	Fax	K ;
asonb@ctagroup.com	(208) 336-490	0	(208) 680-	2597	
Role Type: Architect C Land	d Developer	C Engineer	Contractor	Other	
Owner Information			R	ECEIV	7區(1)
ame as Applicant?:	es (If yes, I	leave this section bl	ank)	APR 2 4 2012	
irst Name:	Last Name:		PLAN	NING & DEVELO	DPMENT
		BECKTS/SAROKAMA-IISA MA		SERVICES	एत्त तहास्थाला है कि दें
ompany:	J L	1118-4-41 (2010)			
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defunce	C14				_
ddress:	City:		State:	Zip	
•					
-mail:	Phone Number:	IIII III N SAHII KARIIIII III III III III II II II II II II	Cell:	Fax	/ E LE VENEZARII DESCRIPTION DE LA CONTRACTOR DE LA CONTR

0	th and Main Tower							
2. Pi	roject Description:							
- 1	Inderground Utilitie for 16 story Office	-	ting/Founda	tions a	nd Si	per	Structur	e 🚣
. Pi	anning & Zoning Information		All his mine a vivine					
Α.	Land Use Zone:	(C-5DD) Central Busin	ess Distri	ct with	DDR		T.V.
В	Design Review Number:							
С	Conditional Use Number:							
D.	Zoning Certificate Number:			-				
Ε	Other:							
B C (Proposed Use: 6 story office tower Occupancy Groups: 51 A2 Construction Type: IBC/IRC) IA		352			S2		
D	Building Height:							
E	Number of Stories:		18					
F	Building Area:	E	Existing: 0			Sq. F	eet	
			New: 350000		a "M Hade	Sq. F	eet	
G.	Is this a shell or shell & core Perm	it?	Yes	○ No				

Fire Information	
A Fire Flow:	1
B. Static Pressure:	
C Is there a fire alarm system?	Yes C No C Partial
D. Is the building fully sprinklered?	Yes C No C Partial
If yes, will the sprinklers be used for:	
Allowable Area Increase?	C Yes C No
Story Increase?	C Yes C No
Fire-resistive Substitution?	C Yes C No
Other?	AMAZANA SAN
If partially sprinklered, where?	
5. Public Works Information	
Site drainage area (acres):	.55

Certificate of Value

Permit Types	
Project Value: Used to calculate fees for the Structural permit. Project Value is the total value of all construction work for which the permit is issued (including overhead and profit), as well as finish work, painting, roofing, electrical,	\$: 12000000
plumbing, heating, air conditioning, elevators, fire extinguishing systems and other permanent equipment. Owner Supplied Equipment	Yes C No
Electrical Value: Total value of all work performed (including overhead and profit) on the job, including the electrical contract and any change orders	\$: 20,000
Owner Supplied Equipment	C Yes C No
Plumbing Value: Total value of all work performed (including overhead and profit) on the job, including the plumbing contract and any change orders	s: 20,000
Owner Supplied Equipment	Yes CNo
Mechanical Value: Total value of all work performed (including overhead and profit) on the job, including the mechanical contract and any change orders	\$: 25,000
Owner Supplied Equipment	C Yes C No
Fire Sprinkler:	\$:
Please select one as it applies to fire sprinklers (Phone: 395-7813)	Remodel C Addition C New System
Fire Alarm System:	\$:
Please select one as it applies to fire alarms (Phone: 395-7809)	New system in new building
	New system in existing building Modification to existing system
I certify that the Values and Scope of Work given is the most acc	urate available at this time.

Erosion & Sediment Control

1.,	Project Type:
	Vertical Const. (Commercial, Multi-Family)
2.	Acres Disturbed:
	Note: Single Family/Duplex/Townhouse must list within .10 acres; all others must list within .25 acres
	Approximate Acres Disturbed: 55

The following items require approval by PDS Erosion and Sediment Control

- Permit Variance Waiver Request
 Plan Waiver Request for Erosion & Sediment Control Plan requirement

Role Type:	CTenant	Architect	C Structural Engineer	Contractor	Other	
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ddress: 2 Exchang	e Place		City: Salt Lake City	THE RESERVE THE PROPERTY OF TH	State:	Zip: 84111
	01100	B.(411/25.1111111111111111111111111111111111	JL		يت ا	MATHEMATINE THE TOTAL PROPERTY OF THE TOTAL
-mail: i@babcock	design com	· · · · · · · · · · · · · · · · · · ·	Phone Number: (801) 531-1144		Cell:	Fax:
		-				
tole Type:	CTenant	CArchitect	Structural Engineer	Contractor	Other	
rst Name:	· · · · · · · · · · · · · · · · · · ·		Last Name:	A COLOR A STRUCTURE STRUCT	TING	
rim			Cantrell		series à commande de la commande de	
ompany:						
VE Inc.						
ddress:		ROURIDOONINE ROURING AMERICA	City:		State:	Zîp:
040 N. 220	0 W. #100		Salt Lake City		UT 💌	84116
-mail:		0 11 10 11	Phone Number:		Cell:	Fax:
tcantrell@p	ve-ut.com		(801) 359-3158			
st Name: lint	Apini		Last Name: Boyle			
ompany:						
lorrocks En	gineers					
ddress:			City:		State:	Zip:
700 E. Frai	nklin Rd		Nampa		ID 🔻	83687
-mail:			Phone Number:		Cell:	Fax:
lintb@horro	ocks.com		(208) 899-0689		L.	
ceptance of th	ed by the Boise C	es not validate the ity Subdivision div	e legal status of any lot or parce vision. It is the applicant's resp r submittal requirements	el Prior to submitting onsibility to provide o	for a Building Permit you deeds and/or other docur	must have a Verification of Legal Par nentation to the Subdivision division
quired Docu	mentation and I	Drawings				
			s Plan Intake Submittal Checkl ss prior to accepting New Comi		Addition applications.	
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 Staff will 	uired Permits					
 Staff will Iditional Requirement The erose Trade present 	sion and sedimen ermits for mechar		of this application is required w d electrical are obtained separa tained separately		it	
Staff will Iditional Requ The ero: Trade p Fire spri e undersigned e undersigned	sion and sedimen ermits for mechan nkler and fire alan declares that the acknowledges th	nical, plumbing an rm permits are ob e above provided at failure to provi	d electrical are obtained separa tained separately information is true and accurat	ately e. on may result in rejec		ossible revocation of the permit whe

Date:

Registered Design Professional Form

Date Received:

Revised 10/2008



Phone 208/384-3802 - Fax 208/384-3867 - TDD/TTY 800/377-3529

Registered Design Professional in Responsible Charge

In accordance with the International Building Code, the **Project Owner** must designate the licensed architect or engineer who is the project's Registered Designed Professional in Responsible Charge.

The designated architect/engineer must be a licensed professional, and is responsible for reviewing and coordinating all submittal documents prepared by consultants for compatibility with the building design. Documents may include deferred submittals, special inspections and structural observations.

			TO 1
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Responsik	ole Charge		
Last	Name: Butler		
		Phone: (20	08) 336-4900
City:	Boise	State: ID	Zip : 83702
Cell:	(208) 608-2597	Fax:	
Last N	Name: Alhquist Sr.		
City:	Boise	State: ID	Zip : <u>83702</u>
Phone	e: (208) 246-8909	Fax:	
nitect/enginared by othe	eer designated shars for the duration o	ll be responsib of the project. I a	le for reviewing and also understand that I
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	Last I City: Cast I City: Phone are following ared by othe	nitect/engineer designated sha ared by others for the duration of anning & Development Service	City: Boise State: ID Cell: (208) 608-2597 Fax: Last Name: Alhquist Sr. City: Boise State: ID Phone: (208) 246-8909 Fax: ne following person as my registered design nitect/engineer designated shall be responsible ared by others for the duration of the project. I a anning & Development Services Building Insported. Last Name: Alhquist Sr. State: ID Phone: (208) 246-8909 Fax: Last Name: Alhquist Sr. Last Name: