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#161: Design Review Application

Case #: DRH15-00098

Property Information							
Address							
Street Number:	Prefix:	Street Name:	Unit #:				
500	S	S CAPITOL BLVD					
Subdivision name:	Block:	Lot:	Section:	Township: Range:		Zoning:	
DAVIS ADD	10	0	10	3 2		C-5DDC	
Parcel Number:		Additional Parcel Numbers:					
R1749101001	R17491	00909					
Primary Contact							
Who is responsible for receiving OAgent/Representative		ding files and Owner	communicat	ing with Boise	City?		
Applicant Information							
First Name:	Last Name						
James	Marsh	•					
Company:							
CSHQA							
Address:	City:	Cibr				Zip:	
200 Broad Street	Boise			State:	~	83702	
E-mail:	Phone Nur	mber:		Cell:		Fax:	
james.marsh@cshqa.com	(208) 343			Cem		(208) 343-1858	
Role Type: Architect O	and Developer	OEngine	eer Ocor	ntractor O	Other		
Craig	Slocum	:					
Company:							
CSHQA							
Address:	City:			State:		Zip:	
200 Broad Street	Bosie			ID	~	83702	
E-mail:	Phone Nur	mber:		Cell:		Fax:	
craig.slocum@cshqa.com	(208) 343	3-4635		100 March 100		(208) 343-1858	
Owner Information							
Same as Applicant?	Yes (If)	es, leave this s	ection blank)				
First Name:	Last Name	2:		7			
Brian	Obie						
Company:				_			
Obie Development LLC	979 No. 20 NO.						
Address:	City:			State:	Total Control	Zip:	
296 East 5th Ave. Suite 300	Eugene	www.		OR	~	97401	
E-mail:	Phone Nur			Cell:		Fax:	
bobie@obie.com	(541) 762	2-1252					

Projec	Information								
Is this	a Modification applicati	ion?	Oyes	⊚ _{No}	File nu	mber being modified:			
1. Neid	hborhood Association:								
	wntown		~						
	prehensive Planning Ar	rea:							
Do	wntown		~						
3. This	application is a reques	t to constr	ruct, add o	r change t	he use of the prop	erty as follows:			
					The state of the s	wntown Boise. With fut and street frontage imp		_	<u>^</u>
- 82	of Property:		in the second	× 1					
.74	6 OAcres OSqua	are Feet							
	· · · · · · · · · · · · · · · · · · ·								
o. Wat	er Issues:								
A. \	What are you fire flow	requirem	ents? (See	e Internat	ional Fire Code):				
350	00								gpm
Not	Number of hydrants (size: Any new hydrants/l			ire United	d Water approval.	Number of Press	and.	0	
	nber of Existing:					Number of Propo	seu:	0	
C. 1	s the building "sprinkle	ered"?	(● Yes	ONo				
	What volume of water	is availab	ole? (Conta	act United	Water of Idaho	at 362-7330):			100.000
250	00								gpm
6. Exis	ting uses and structure	s on the p	roperty are	e as follow	/s:				
No	existing building struct	tures, exis	sting use:	paved pa	rking lot.				_
7 Tc+	ne project intended to b	a nhasada	Plazes av	nlain					7
No.	ie project intended to b	e pilaseu:	Please ex	ріані.					A
									-
3. Adja	cent property information	on:							
	Building types and/or uses		one						
Nort	h: Dunkley's	North: (C-5DDC) (Central Bu	usiness District				
Sout	h: Coldwell Banker To	South: (C-5DDC) (Central Bu	usiness District 🗸]			
East	: Home Partnership	East: (R-ODD) R	esidential	Office w/Dowr]			
Wes	t: Jackson's Gas Stati	West: (C-5DDC) (Central Bu	usiness District 🗸]			

Square	footage of p	ronosed structures or a	additions (if 5+ floors	attach narrative with chart)		
Square	lootage or pr	Gross Square F		attacii ilaii ative witii cilait)		
	1st Floor	9292				
	2nd Floor	14585				
	3rd Floor	14595				
	4th Floor	14595				
B. Maxir	mum propos	ed structure height(s):	pr (1)	92	1	
C. Number of stories:				7	1	
D. Num	ber of seats	(if restaurant, tavern o	20 NO 1	0	1	
		ntial units (if applicable		107	1	
	Structures:	S. 412			58	
		xisting structures or ad	ditions (if 5+ floors, a	ttach narrative with chart):		
		Gross Square F				
	1st Floor					
	2nd Floor					
	3rd Floor					
	4th Floor					
n :ld:	F. L					
1. Building	Exterior:	Materials		Colors		
Roof:		Standing Seam Meta	l Roof	Patina Gre	en	
Walls:			Panels, Precast Concre	ete Thunder G	ray/ Weathered	d Shingle/ Basket Beig
Window	s/Doors:	Secretary and the second secon	lows and Aluminum St	- 19-19		
	Trim, etc:					
Fascia,					Prown	
Fascia, Other:		Brick Veneer		Moroccan	DIOWII	
100000000000000000000000000000000000000	5:	Brick Veneer		Moroccan	biowii	
Other:	7.00	Brick Veneer not graphically dimens	ioned will not be acce		DIOWII	
Other:	7.00	not graphically dimens	ioned will not be acce Building Proposed			Parking Proposed
Other:	ans that are	not graphically dimens		pted.		Parking Proposed
Other: 2. Setbacks Note: Pla	ans that are Building Re	not graphically dimens	Building Proposed	pted. Parking Required		
Other: 2. Setbacks Note: Pl	ans that are Building Re	not graphically dimens	Building Proposed 17'-10"	pted. Parking Required		

9. Proposed Structures:

13.	Site Design:						
		Site Percentage Devote	ed to			Square Feet	
	Building Coverage:	52				16955	
		%					
	Landscaping:	5				1816	
		%					
	Paving:	43				13984	
	23. 100	%					
	Other Uses:	%					
	Describe Other Uses:	70					
	and the same of th						
14.	Parking:	D-	quired			Proposed	
	Associale Consess	2	quireu			2	
	Accessible Spaces:						
	Parking Spaces:	0				24	
	Bicycle Spaces:	0				7	
	Proposed compact spaces:					0	
	Are you proposing off-site pa	rking?		Oyes	⊚ No		
	The year proposing on site pa	20 20					
If yes, how many spaces?							
	Are you requesting shared pa	arking or a parking redu	ction?	Oyes	◎No		
		If yes, how r	many spaces	?			
	Restricted parking?			Oyes	⊚ _{No}		
	reserved parterig.			0.03			
15.	Landscaping:						
	A. Are there any prominent tr	ees or areas of vegetati	on on the pr	operty?	⊚ Yes	Ono	
	B. Type: Dec	iduous					
	C. Size:						
	D. General Location: Var	ies					
16.	Mechanical Units:						
	Number of Units:	1					
	Unit Location:	7th Floor					
	Type:	Geothermal Heat and	Chilled Wate	er Cooling			
	Height:						
	Proposed Screening Method:	Partially enclosed 7th	Floor Mecha	nical room			

17.Solid Waste:								
A. Type of tras	h receptacles:							
☑3 × □6 × □8 ×	dividual Can/Resider /d. Dumpster /d. Dumpster /d. Dumpster mpactor	ntial						
B. Number of t	rash receptacles:		[1				
C. Proposed so	reening method:		[Internal T	rash Room			
	sed location access Public Works at 38		n?	⊚ Yes	ONo			
E. Is recycling	proposed?			⊚ Yes	ONo			
18.Irrigation Ditch	es/Canals:							
A. Are there ar property?	y irrigation ditches	or canals on or	adjacent to t	he	Oyes	⊚ No		
B. Location:								
C. Size:								
19.Fencing:								
Prope	osed		Existing to Re	main				
Type:		~						
Height:								
Location:								
20.Loading Facilitie	s (if proposed, for	commercial uses	only):					
Number:	1							
Location:	In alley along	south east come	er of Ground	Floor				
Size:	10'x35'							
Screening:								
21.Drainage:								
Proposed meth	od of on-site reten	tion:	(2) underg	round See	page Beds]	
22.Floodways & Hi	lsides:							
A. Is any portion Floodplain?	on of this property I	located in a Floo	dway or a 10	0-year	Oyes	® No		
B. Does any po	ortion of this parcel	have slopes in e	excess of 15%	6?	Oyes	◎ No		
	swer to either of th You must submit th						application and	
23.Airport Influence								
_	site located within t			r yes, pleas	se mark whi	cn area.)		
●No OAre	A A Area B	OArea B1	OArea C					

Licensed Architect Information			
Zoning Ordinance Section 11-07-02 r	equires a licensed architect for new buildir	ngs and additions over	200 sq. ft.
Is the project's Architect listed on the	e first page? Oves Ono	(If yes, leave this	section blank.)
	3 23		•
First Name:	Last Name:		
Company:			
	222		
Address:	City:	State:	Zip:
			<u> </u>
E-mail:	Phone Number:	Cell:	Fax:
D (. 1 "			
Professional License #:			
Landscape Professional Information	tion		
Is the project's Landscape Profession	nal listed on the first page? Oves C	No (If yes, leave	this section blank.)
First Name: Kyle	Last Name: Hemly		
	nemly		
Company:			
CSHQA			
Address:	City:	State:	Zip:
200 Broad Street	Boise	ID	83702
E-mail:	Phone Number:	Cell:	Fax:
kyle.hemly@cshqa.com	(208) 343-4635		(208) 343-1858
Professional License #:			
LA-264			
Verification of Legal Lot or Parce	Status		
	ot validate the legal status of any lot or pa		
	m signed by the Boise City Subdivision De		
and/or other documentation to the S	ubdivision Department. See Verification of	Legal Lot or Parcel Wo	orksheet for submittal requirements.
The undersigned declares that the ab	ove provided information is true and accur	rate.	
	ailure to provide true and accurate inform		
revocation of the permit where wrong	fully issued and subject the undersigned a	any applicable civil and	or criminal penalties.
F			
Agent/Representative Signature:			
Date			