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## #109: Conditional Use Application

Case #: CUP16-00088

Address						
Street Number:	Prefix:	Street Name	-			Unit #:
101	S	CAPITOL BL	10 March 10	26 X 7420	GOM:	6: 40 80
Subdivision name:	Block:	Lot:	Section:	Township:	Range:	Zoning:
	8		10	3	2	C-5DDC
Parcel Number:	Addition	al Parcel Numb	oers:			-
R1013000655						
Primary Contact						
Who is responsible for receiving	The second secon	oading files a	and commun	nicating with B	oise City?	
Applicant Information						
First Name:	Last Name	2:				
Tom	Ahlquist					
Company:						
Gardner Company				<u> </u>		
Address:	City:			State:		Zip:
101 S. Capitol Blvd., Suite 1700	Boise			ID	~	83702
E-mail: Phone Nun		mber:		Cell:	125 543	Fax:
tom@gardnercompany.net (208) 246		211-212-212-11				
25		5-8909			×=×	
Agent/Representative Inform		OEn	gineer C	Contractor	Oother	
Agent/Representative Information	ation Land Developer	OEn	gineer C	Contractor	Oother	
Agent/Representative Information Role Type:   Architect  First Name:	ation  Land Developer  Last Name	OEn	gineer C	Contractor	Other	
Agent/Representative Information  Role Type:   Architect  First Name:  Brad	ation  Land Developer  Last Name	OEn	gineer C	Contractor	Oother	
Agent/Representative Information  Role Type: Architect  First Name: Brad  Company: Babcock Design Group  Address:	Land Developer Last Name Smith City:	OEn	gineer C	State:	7-37-20-20	Zip:
Agent/Representative Information  Role Type: Architect  First Name: Brad  Company: Babcock Design Group	Land Developer  Last Name   Smith	OEn	gineer C		7-37-20-20	<b>Z</b> ip: 83702
Agent/Representative Inform:  Role Type:  Architect  First Name: Brad  Company: Babcock Design Group  Address: 800 W. Main St., Suite 940  E-mail:	Land Developer Last Name Smith  City: Boise Phone Nu	○Eng	gineer C	State:	7-37-20-20	
Agent/Representative Information  Role Type: Architect  First Name: Brad  Company: Babcock Design Group  Address:  800 W. Main St., Suite 940	Land Developer  Last Name Smith  City: Boise	○Eng	gineer C	State:	7-37-20-20	83702
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Agent/Representative Information  Role Type: Architect  First Name: Brad  Company: Babcock Design Group  Address: 800 W. Main St., Suite 940  E-mail: brad@babcockdesign.com  Owner Information	Land Developer Last Name Smith  City: Boise Phone Nu (208) 424	○Eng		State: ID Cell:	7-37-20-20	83702
Agent/Representative Inform:  Role Type:  Architect  First Name: Brad  Company: Babcock Design Group  Address: 800 W. Main St., Suite 940  E-mail: brad@babcockdesign.com  Owner Information  Same as Applicant?  No	Land Developer  Last Name Smith  City: Boise Phone Nu (208) 424	mber: 1-7675		State: ID Cell:	7-37-20-20	83702
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Pr	oject Information						
Is	this a Modification a	pplication?	Oyes	<b>⊚</b> No	File number being modified:		
1.	Neighborhood Assoc	iation:					
	Downtown Boise	***************************************	~				
2.	Comprehensive Plan	ning Area:					
	Downtown	6000	~				
3.	This application is a	request to constr	uct, add or	change the us	se of the property as follows:		
	Tenant Improvemen	nt Design of a D	aycare Cer	nter on the gr	ound floor of the US Bank Building		-
4.	Size of Property:						
	2.14	OSquare Feet					
5.	Water Issues:						
	A. What are you fire	e flow requireme	ents? (See	International	Fire Code):		
	3000						gpm
	B. Number of hydra						
	Note: Any new hyd	rants/hydrant pi	ping requir	e United Wat	ter approval.	110	495
	Number of Existing	:	0		Number of Proposed:	0	, and the second
	C. Is the building "s	sprinklered"?	<b>⊚</b> ve	es ONo			
	-	water is availabl	e? (Contac	t United Wat	er of Idaho at 362-7330):		- Income and
	3000						gpm
6.	Existing uses and str	uctures on the pr	operty are	as follows:			
	N/A						<u></u>
7.	Is the project intend	ed to be phased?	Please exp	lain:			~
	NO						
0	Adjacent property info						y.
0.	Building types and/o						
	uses						
	North: N/A	North:			~		
	South: B	South:			~		
	East: B	East:			~		
	West: B	West:			~		

		Gross Square Fe	et		
	1st Floor	4202			
	2nd Floor	0			
	3rd Floor	0			
	4th Floor	0			
B. Maxi	mum propos	ed structure height(s):		0	
C. Num	ber of storie	s:		0	
D. Num	ber of seats	(if restaurant, tavern or	lounge):	0	
E. Num	ber of reside	ntial units (if applicable)	:	0	
). Existing	Structures:				
Square	footage of e	xisting structures or add	itions (if 5+ floors, a	ttach narrative with chart):	
		Gross Square Fe	et		
	1st Floor	0			
	2nd Floor	0			
	3rd Floor 0				
	4th Floor	0			
L. Building	Exterior:				
		Materials		Colors	
Roof:		N/A			
Walls:		N/A			
wans.	In-	N/A			
Window	vs/Doors:				
Window	Trim, etc:	N/A			
Window		N/A N/A			
Window Fascia,	Trim, etc:	1000			
Window Fascia, Other:	Trim, etc: s: lans that are	N/A not graphically dimension			
Window Fascia, Other: Setback Note: Pl	Trim, etc: s: lans that are Building Re	N/A not graphically dimension	oned will not be acce	pted. Parking Required	Parking Proposed
Window Fascia, Other: Setback Note: Pl	Trim, etc: s: lans that are Building Re	N/A not graphically dimension			Parking Proposed
Window Fascia, Other: Setback Note: Pl Front: Rear:	Trim, etc: s: lans that are Building Re N/A N/A	N/A not graphically dimension			Parking Proposed
Window Fascia, Other: 2. Setback Note: Pl	Trim, etc: s: lans that are Building Re N/A N/A	N/A not graphically dimension			Parking Proposed

9. Proposed Structures:

13. Site Design:						
	Site Percen	tage Devoted to		Squa	re Feet	
Building Coverage:	0					
	%			100		
Landscaping:	0 %					
D- in-						
Paving:	0 %			1/2		
Other Uses:	0					
other oses.	%			10		
Describe Other Uses:	0					
14. Parking:						
er oracierator Circot es <del>- u</del> se		Required			Proposed	
Accessible Spaces:		0				
Parking Spaces:		0				
Bicycle Spaces:		0				
Proposed compact sp	aces:	ha.		1		
				0	ž.	
Are you proposing off	-site parking?		⊚Yes	ONo		
		If yes, how many spa	ces? 0			
Are you requesting sh	nared parking or a	parking reduction?	Oyes	<b>⊚</b> No		
			2			
25/64/2010/03/6/2010/10/2010/03/6/		If yes, how many spa	-			
Restricted parking?			OYes	<b>⊚</b> No		
15. Landscaping:						
A. Are there any prom	inent trees or area	as of vegetation on the	property?	Oyes	ONo	
	21/2		S200 (A)		1	
B. Type:	N/A				1	
C. Size:	N/A					
D. General Location:	N/A					
16. Mechanical Units:						
Number of Units:	0					
Unit Location:	0					
Unit Location: Type:	0					
Type:	NI.					
	0					

A. Type of	trash receptacles:			
Į.	Individual Can/Residential			
	3 Yd. Dumpster			
ŀ	6 Yd. Dumpster 8 Yd. Dumpster			
i	Compactor			
B. Number	r of trash receptacles:	0		
C. Propose	ed screening method:	N/A		
	proposed location accessible for collection? Boise Public Works at 384-3901.)	⊚ <sub>Yes</sub> ○ <sub>No</sub>		
E. Is recyc	ling proposed?	⊚ <sub>Yes</sub> ○ <sub>No</sub>		
18.Irrigation (	Ditches/Canals:			
A. Are the property?	re any irrigation ditches or canals on or adj	acent to the Oves ONo		
B. Location	n:			
C. Size:				
19.Fencing:				
	Proposed Existing to	Remain		
Type:	N/A			
Height:	N/A			
Location:	N/A			
20.Loading Fa	cilities (if proposed, for commercial uses or	nly):		
Number:	N/A	1002155		
Location:	N/A			
Size:	N/A			
Screening	: N/A			
21.Drainage:				
Proposed	method of on-site retention: N/A	ă		
22.Floodways	& Hillsides:			
A. Is any p	portion of this property located in a Floodw	ay or a 100-year Floodplain?	Oyes   No	
B. Does ar	ny portion of this parcel have slopes in exce	ess of 15%?	Oyes   No	
	e answer to either of the above is yes, you and additional fee.	will be required to submit an ad	ditional #112 Floodplain and/or #114 Hillsi	de
23.Airport Infl				
Is the sub	ject site located within the Airport Influence	e Area? (If yes, please mark whic	th area.)	
⊚No €	Area A OArea B OArea B1	OArea C		

17.Solid Waste:

## Verification of Legal Lot or Parcel Status

Acceptance of this application does not validate the legal status of any lot or parcel. Prior to submitting for a Building Permit you must have a Verification of Legal Parcel Status form signed by the Boise City Subdivision Department. It is the applicant's responsibility to provide deeds and/or other documentation to the Subdivision Department, See Verification of Legal Lot or Parcel Worksheet for submittal requirements.

The undersigned	declares that the	e ahove provided	information is t	rue and accurate.
THE GIRDER SIGNED	accial co that the	C GDOYC DIOVIGOG	IIII O I I I I I I I I I I I I	accurate accurate

The undersigned acknowledges that failure to provide true and accurate information may result in rejection of this application, possible revocation of the permit where wrongfully issued and subject the undersigned any applicable civil and/or criminal penalties.

Agent/Representative Signature:	
Date:	
Date.	