

#109 Conditional Use Application

Case #: CUP19-00028

Property Information

Address

Street Number: 2222	Prefix: S	Street Name: STEPHEN AVE	Unit #: 			
Subdivision name: UTTER SUB	Block: 0	Lot: 8	Section: 23	Township: 3	Range: 2	Zoning: R-2D
Parcel Number: R8930000045	Additional Parcel Numbers: 					

Primary Contact

Who is responsible for receiving e-mail, uploading files and communicating with Boise City?

☒ Agent/Representative ☐ Applicant ☐ Owner

Applicant Information

First Name: Jeff	Last Name: Hatch		
Company: Hatch Design Architecture			
Address: 6126 W. State St. Suite 107	City: Boise	State: ID	Zip: 83703
E-mail: jeff@hatchda.com	Phone Number: (208) 475-3204	Cell: 	Fax: 

Agent/Representative Information

Role Type: ☒ Architect ☐ Land Developer ☐ Engineer ☐ Contractor ☐ Other

First Name: Jeff	Last Name: Hatch		
Company: Hatch Design Architecture			
Address: 6126 W. State St. Suite 107	City: Boise	State: ID	Zip: 83703
E-mail: jeff@hatchda.com	Phone Number: (208) 475-3204	Cell: 	Fax: 

Owner Information

Same as Applicant? ☒ No ☐ Yes (If yes, leave this section blank)

First Name: Richard	Last Name: Bennett		
Company: BrightStar Care of Boise			
Address: 2816 W. Clark St.	City: Boise	State: ID	Zip: 83705
E-mail: caroline.moore@brightstarcare.com	Phone Number: (208) 338-7878	Cell: (208) 830-0478	Fax: 

Project Information

Is this a Modification application? ☐ Yes ☒ No File number being modified:

1. Neighborhood Association:

Southeast Boise

2. Comprehensive Planning Area:

Southeast

3. This application is a request to construct, add or change the use of the property as follows:

To construct a new residential care facility.

4. Size of Property:

☒ Acres ☐ Square Feet

5. Water Issues:

A. What are your fire flow requirements? (See International Fire Code):

gpm

B. Number of hydrants (show location on site plan):

Note: Any new hydrants/hydrant piping require Suez Water approval.

Number of Existing:  Number of Proposed:

C. Is the building "sprinklered"? ☒ Yes ☐ No

D. What volume of water is available? (Contact SUEZ (208) 362-7354):

gpm

6. Existing uses and structures on the property are as follows:

Single family dwelling to be removed.

7. Is the project intended to be phased? Please explain:

No

8. Adjacent property information:

Building types and/or uses		Zone	
North:	<input type="text" value="Residence"/>	North:	<input type="text" value="(R-2D)Combined Residential w/Desig"/> <input type="button" value="v"/>
South:	<input type="text" value="Apartments"/>	South:	<input type="text" value="(R-2D)Combined Residential w/Desig"/> <input type="button" value="v"/>
East:	<input type="text" value="Gym"/>	East:	<input type="text" value="(L-OD) Limited Office with Design Re"/> <input type="button" value="v"/>
West:	<input type="text" value="Residence"/>	West:	<input type="text" value="(R-2D)Combined Residential w/Desig"/> <input type="button" value="v"/>

9. Proposed Structures:

A. Number of Structures:  Use:

Square footage of proposed structures or additions (if 5+ floors, attach narrative with chart):

	Gross Square Feet
1st Floor	<input type="text" value="4800"/>
2nd Floor	<input type="text" value="0"/>
3rd Floor	<input type="text" value="0"/>
4th Floor	<input type="text" value="0"/>

B. Maximum proposed structure height(s):

C. Number of stories:

D. Number of seats (if restaurant, tavern or lounge):

E. Number of residential units (if applicable):

10. Existing Structures:

Square footage of existing structures or additions (if 5+ floors, attach narrative with chart):

	Gross Square Feet
1st Floor	<input type="text"/>
2nd Floor	<input type="text"/>
3rd Floor	<input type="text"/>
4th Floor	<input type="text"/>

11. Building Exterior:

	Materials	Colors
Roof:	<input type="text" value="Asphalt Shingle"/>	<input type="text" value="Charcoal"/>
Walls:	<input type="text" value="Lap &amp; Shingle Siding"/>	<input type="text" value="Gray"/>
Windows/Doors:	<input type="text" value="Vinyl"/>	<input type="text" value="White"/>
Fascia, Trim, etc:	<input type="text" value="Harditrim"/>	<input type="text" value="White"/>
Other:	<input type="text"/>	<input type="text"/>

12. Setbacks:

Note: Plans that are not graphically dimensioned will not be accepted.

	Building Required	Building Proposed	Parking Required	Parking Proposed
Front:	<input type="text" value="20"/>	<input type="text" value="35'-10"/>	<input type="text" value="20"/>	<input type="text" value="42'"/>
Rear:	<input type="text" value="15"/>	<input type="text" value="47'-2"/>	<input type="text" value="15"/>	<input type="text" value="139'"/>
Side 1:	<input type="text" value="5"/>	<input type="text" value="26'-3"/>	<input type="text" value="5"/>	<input type="text" value="10'"/>
Side 2:	<input type="text" value="5"/>	<input type="text" value="9'-10"/>	<input type="text" value="5"/>	<input type="text" value="62'"/>

**13. Site Design:**

	Site Percentage Devoted to	Square Feet
Building Coverage:	<input type="text" value="24"/>	<input type="text" value="4800"/>
	%	
Landscaping:	<input type="text" value="51"/>	<input type="text" value="9991"/>
	%	
Paving:	<input type="text" value="25"/>	<input type="text" value="4811"/>
	%	
Other Uses:	<input type="text"/>	<input type="text"/>
	%	
Describe Other Uses:	<input type="text"/>	

**14. Parking:**

	Required	Proposed
Accessible Spaces:	<input type="text" value="1"/>	<input type="text" value="1"/>
Parking Spaces:	<input type="text" value="3"/>	<input type="text" value="5"/>
Bicycle Spaces:	<input type="text" value="0"/>	<input type="text" value="0"/>
Proposed compact spaces:		<input type="text" value="0"/>

Are you proposing off-site parking? ☒ Yes ☐ No

If yes, how many spaces?

Are you requesting shared parking or a parking reduction? ☐ Yes ☒ No

If yes, how many spaces?

Restricted parking? ☐ Yes ☐ No

**15. Landscaping:**

A. Are there any prominent trees or areas of vegetation on the property? ☐ Yes ☒ No

B. Type:

C. Size:

D. General Location:

**16. Mechanical Units:**

Number of Units:

Unit Location:

Type:

Height:

Proposed Screening Method:



**17.Solid Waste:**

A. Type of trash receptacles:

- ☒ Individual Can/Residential  
☐ 3 Yd. Dumpster  
☐ 6 Yd. Dumpster  
☐ 8 Yd. Dumpster  
☐ Compactor

B. Number of trash receptacles:

C. Proposed screening method:

D. Is the proposed location accessible for collection?  
(Contact Boise Public Works at 384-3901.)☒ Yes ☐ No

E. Is recycling proposed?

☒ Yes ☐ No**18.Irrigation Ditches/Canals:**

A. Are there any irrigation ditches or canals on or adjacent to the property?

☐ Yes ☒ No

B. Location:

C. Size:

**19.Fencing:****Proposed****Existing to Remain**

Type:	<input type="text" value="Wood"/>	<input type="text" value="Wood"/>
Height:	<input type="text" value="6'"/>	<input type="text" value="6'"/>
Location:	<input type="text" value="North, South"/>	<input type="text" value="East"/>

**20.Loading Facilities** (if proposed, for commercial uses only):

Number:	<input type="text"/>
Location:	<input type="text"/>
Size:	<input type="text"/>
Screening:	<input type="text"/>

**21.Drainage:**

Proposed method of on-site retention:

**22.Floodways & Hillside:**

A. Is any portion of this property located in a Floodway or a 100-year Floodplain?

☐ Yes ☒ No

B. Does any portion of this parcel have slopes in excess of 15%?

☐ Yes ☒ No

Note: If the answer to either of the above is yes, you will be required to submit an additional #112 Floodplain and/or #114 Hillside application and additional fee.

**23.Airport Influence Area:**

Is the subject site located within the Airport Influence Area? (If yes, please mark which area.)

☒ No ☐ Area A ☐ Area B ☐ Area B1 ☐ Area C

**Verification of Legal Lot or Parcel Status**

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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 above provided information is true and 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.

<b>Agent/Representative Signature:</b>	<div></div>
<b>Date:</b>	<div></div>