

#161 Design Review Application

Case #: DRH19-00248

Property Information

Address

Street Number: 7881	Prefix: W	Street Name: EMERALD ST	Unit #: 			
Subdivision name: TOWNE SQUARE	Block: 0	Lot: 0	Section: 12	Township: 3	Range: 1	Zoning: C-2/D
Parcel Number: S1112427310	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: Bob	Last Name: Kellam	State: ND	Zip: 58104
Company: Brandt Hospitality Group, Inc.	City: Fargo	Cell: 	Fax: (701) 356-0395
Address: 2640 47th Street S	Phone Number: (701) 551-8907		
E-mail: bob.kellam@brandthg.com			

Agent/Representative Information

Role Type: Architect Land Developer Engineer Contractor Other

First Name: Brandon	Last Name: McDougald	State: UT	Zip: 84111
Company: Kimley Horn & Associates, Inc.	City: Salt Lake City	Cell: (801) 915-7842	Fax:
Address: 215 S State St., Suite 400	Phone Number: (385) 212-3180		
E-mail: brandon.mcdougald@kimley-horn.com			

Owner Information

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

First Name: Katherine	Last Name: Donnelly	State: IL	Zip: 60654
Company: Boise Mall, LLC	City: Chicago	Cell: 	Fax:
Address: 350 N. Orleans Street, #300	Phone Number: (312) 960-2975		
E-mail: katherine.donnelly@brookfieldpropertie			

Project Information

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

1. Neighborhood Association:

2. Comprehensive Planning Area:

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

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:

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

8. Adjacent property information:

Building types and/or uses	Zone
North: <input type="text" value="Commercial/Retail"/>	North: <input type="text" value="(C-2D) General Commercial w/Desi"/>
South: <input type="text" value="Mall/Retail"/>	South: <input type="text" value="(C-2D) General Commercial w/Desi"/>
East: <input type="text" value="Parking for Mall"/>	East: <input type="text" value="(R-1A) Single Family Residential"/>
West: <input type="text" value="Hotel"/>	West: <input type="text" value="(C-2D) General Commercial w/Desi"/>

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="14514"/>
2nd Floor	<input type="text" value="14341"/>
3rd Floor	<input type="text" value="14341"/>
4th Floor	<input type="text" value="14341"/>

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" value="0"/>
2nd Floor	<input type="text" value="0"/>
3rd Floor	<input type="text" value="0"/>
4th Floor	<input type="text" value="0"/>

11. Building Exterior:

	Materials	Colors
Roof:	<input type="text" value="TPO"/>	<input type="text" value="Tan"/>
Walls:	<input type="text" value="EIFS/Stone/Siding"/>	<input type="text" value="Varies - See Plans"/>
Windows/Doors:	<input type="text" value="Aluminum/Hollow Metal"/>	<input type="text" value="Varies - See Plans"/>
Fascia, Trim, etc:	<input type="text"/>	<input type="text"/>
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="10"/>	<input type="text" value="181.4"/>	<input type="text" value="10"/>	<input type="text" value="13"/>
Rear:	<input type="text" value="15"/>	<input type="text" value="15.4"/>	<input type="text" value="10"/>	<input type="text" value="N/A"/>
Side 1:	<input type="text" value="10"/>	<input type="text" value="56"/>	<input type="text" value="10"/>	<input type="text" value="10"/>
Side 2:	<input type="text" value="10"/>	<input type="text" value="47.2"/>	<input type="text" value="10"/>	<input type="text" value="83.3"/>

13. Site Design:

	Site Percentage Devoted to	Square Feet
Building Coverage:	14 %	14514
Landscaping:	21 %	20954
Paving:	65 %	67334
Other Uses:		
Describe Other Uses:	Paving % includes half width of Rifleman Street	

14. Parking:

	Required	Proposed
Accessible Spaces:	5	5
Parking Spaces:	106	106
Bicycle Spaces:	11	12
Proposed compact spaces:		21

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:

Height:

Location:

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

Number:

Location:

Size:

Screening:

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 Floodplain and/or Hillside application and additional fee. You must submit the additional required application(s) for review at the same time as this request.

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

Licensed Architect Information

Zoning Ordinance Section 11-07-02 requires a licensed architect for new buildings and additions over 200 sq. ft.

Is the project's Architect listed on the first page? Yes No (If yes, leave this section blank.)

First Name: **Last Name:**

Company:

Address: **City:** **State:** **Zip:**

E-mail: **Phone Number:** **Cell:** **Fax:**

Professional License #:

Landscape Professional Information

Is the project's Landscape Professional listed on the first page? Yes No (If yes, leave this section blank.)

First Name: **Last Name:**

Company:

Address: **City:** **State:** **Zip:**

E-mail: **Phone Number:** **Cell:** **Fax:**

Professional License #:

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 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.

Agent/Representative Signature:

Date: