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#109 Conditional Use Application

Case #: CUP19-00064

Address							
	Prefix:	Charact Name				11-2-4-	
Street Number: 3047	S	Street Name: BOWN WAY				Unit #:	
Subdivision name:	Block:	Lot:	Section:	Township:	Range:	Zoning:	
RIVERWALK SUB NO 01	01	02	25	3	2	C-1D	
Parcel Number:		al Parcel Numb			_		
R7476720020	Addition	ai Parcei Nullio	rei 31				
Primary Contact							
Who is responsible for receiving	ng o-mail unl	onding files a	and commun	icating with 0	oico Citu?		
	_	Owner	illu Collilliul	icating with b	oise City:		
Organic/Representative	О Аррисанс	Owner					
Applicant Information							
First Name:	Last Name	2:					
John	Day						
Company:							
SU Architecture							
Address:	City:			State:		Zip:	
415 South 13th Street	Boise			ID	~	83702	
E-mail:	Phone Nu	mber:		Cell:		Fax:	
-mail: Phone Nur ohnd@suarchitecture.com (208) 395			-	Celli.		rax.	
88		5-1080					
Agent/Representative Information	ation Land Developer	OEng	gineer C	Contractor	Oother		
Agent/Representative Information Role Type: Architect First Name:	ation Land Developer Last Name	OEng	gineer C	Contractor	Oother		
Agent/Representative Information Role Type: Architect First Name: John	ation Land Developer	OEng	gineer C	Contractor	Oother		
Agent/Representative Information Role Type: Architect First Name: John Company:	ation Land Developer Last Name	OEng	gineer C	Contractor	Oother		
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture	Land Developer Last Name	OEng	gineer C		Other	7:	
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address:	Land Developer Last Name Day City:	OEng	gineer	State:		Zip: 83702	
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street	Land Developer Last Name Day City: Boise	○Eng ≘:	pineer C	State:	Oother	83702	
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street E-mail:	Land Developer Last Name Day City: Boise Phone Nu	OEng	gineer C	State: ID Cell:	<u>~</u>		
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street	Land Developer Last Name Day City: Boise	OEng	gineer	State:	<u>~</u>	83702	
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Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street E-mail: johnd@suarchitecture.com Owner Information	Land Developer Last Name Day City: Boise Phone Nu	OEng	gineer C	State: ID Cell:	<u>~</u>	83702	
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street E-mail: johnd@suarchitecture.com Owner Information	City: Boise Phone Nu (208) 395	OEng		State: ID Cell: (208) 395-10	<u>~</u>	83702	
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street E-mail: johnd@suarchitecture.com Owner Information Same as Applicant? No	Land Developer Last Name Day City: Boise Phone Nu (208) 395	mber: 5-1080		State: ID Cell: (208) 395-10	<u>~</u>	83702	
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street E-mail: johnd@suarchitecture.com Owner Information Same as Applicant? No First Name:	Land Developer Last Name Day City: Boise Phone Num (208) 395	mber: 5-1080		State: ID Cell: (208) 395-10	<u>~</u>	83702	
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Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street E-mail: johnd@suarchitecture.com Owner Information Same as Applicant? No First Name: Boyd Company:	Land Developer Last Name Day City: Boise Phone Num (208) 395	mber: 5-1080		State: ID Cell: (208) 395-10	<u>~</u>	83702	
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street E-mail: johnd@suarchitecture.com Owner Information Same as Applicant? No First Name: Boyd Company: Yick Yee Family Trust	City: Boise Phone Num (208) 395	mber: 5-1080		State: ID	<u>~</u>	83702 Fax:	
Agent/Representative Information Role Type: Architect First Name: John Company: SU Architecture Address: 415 South 13th Street E-mail: johnd@suarchitecture.com Owner Information Same as Applicant? No First Name: Boyd Company: Yick Yee Family Trust Address:	City: Boise Phone Num (208) 395 Ves (If) Last Name Yee	mber: 5-1080		State: ID Cell: (208) 395-10	<u>~</u>	83702 Fax:	
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this a Modification application?	O _{Yes} (⊚ No	File number being modified:	
Neighborhood Association:				
Southeast Boise	~			
Comprehensive Planning Area:				
Southeast	~			
This application is a request to constr	uct, add or cha	nge the use of	the property as follows:	
Construct approximately 6,700 sq.f	t. multi-tenant	retail building	with request for parking reduction	on 🛅
Size of Property:				<u>×</u>
0.534 OAcres OSquare Feet				
0.33T OACIES OSquare reet				
Water Issues:				
A. What are your fire flow requirem	ents? (See Int	ernational Fire	Code):	
2500				gpr
B. Number of hydrants (show locat Note: Any new hydrants/hydrant pi			proval.	
Number of Existing:	1		Number of Proposed:	0
C. Is the building "sprinklered"?	Oyes	⊚ No		
D. What volume of water is availab	le? (Contact SI	JEZ (208) 362	-7354):	
2500				gpn
Existing uses and structures on the p	roperty are as f	ollows:		
none	<u> </u>			A
				v
Is the project intended to be phased?	Please explain	:		
no				
				1
Adjacent property information: Building types and/or Zone uses				
North: residential North: (R-:	LC) Single Fam	ily Residential	~	
South: mixed use South: (P-0	CD) Pedestrian	Commercial w	v/Des V	
East: mixed use	D) Neighborh	ood Commercia	al w/ V	
	D) Neighborho			

Square	rootage of p		es or additions (if 5+ flo quare Feet	oors, attach narrati	ve with chart):	
	1st Floor	6700				
	2nd Floor	0				
	3rd Floor	0				
	4th Floor	0				
B. Maxi	mum propos	sed structure hei	aht(s):	24		
	B. Maximum proposed structure height(s): C. Number of stories:		1			
\$200 L. 2000		100 mg 1 100 mg	restaurant, tavern or lounge):			
		ential units (if ap		0		
10. Existing				-		
_		existing structure	s or additions (if 5+ floo	rs, attach narrative	e with chart):	
		Gross S	quare Feet			
	1st Floor	0				
	2nd Floor	0				
	3rd Floor	0				
	4th Floor	0				
11. Building	Exterior:					
1777		Materials		c	olors	
Roof:		TPO Membrane)	W	/hite	
Walls:		Stucco/Brick		T	an/Beige	
Window	s/Doors:	Aluminum Store	efront		lear Anodized	
Fascia,	Trim, etc:	Pre-finished Me	etal	C	harcoal Grey	
Other:		Patio Cover		e	xposed steel/wo	od
12. Setback	5:					
Note: Pl			dimensioned will not be	accepted.		
	Building Re	equired	Building Proposed		Required	Parking Proposed
	10'		12'	23		0
Front:	0'		76'	23		14
Rear:		22'		23		0
	10' 0'		12'	23		0

9. Proposed Structures:

3. Site Design:	Site Percen	tage Devoted to		So	quare Feet	
Building Coverage:	29	auge Devotes to			700	
building coverage.	%					
Landscaping:	35			79	935	
	%					
Paving:	23 %			51	188	
Other Uses:	6			1/2	460	
Other Oses.	%				100	
Describe Other Uses:	Patio					
4. Parking:						
		Required			Proposed	
Accessible Spaces:		1			1	
Parking Spaces:		23			14	
Bicycle Spaces:		2			8	
Proposed compact sp	aces:				3	
			_	0		
Are you proposing off	site parking?		Vac	(®)No		
Are you proposing off			Oyes	⊚ No		
		If yes, how many spa	ices?	A=0.000		
Are you proposing off Are you requesting sh			-	®No ®No		
	ared parking or a		O _{Yes}	A=0.000		
	ared parking or a	parking reduction?	O _{Yes}	A=0.000		
Are you requesting sh Restricted parking?	ared parking or a	parking reduction?	Oyes	⊚ _{No}		
Are you requesting sh Restricted parking?	ared parking or a	parking reduction? If yes, how many spa	OYes OYes OYes	⊚ _{No}	; O _{No}	
Are you requesting sh Restricted parking? 5. Landscaping:	ared parking or a	parking reduction? If yes, how many spa	OYes OYes OYes	●No ●No	; O _{No}	
Are you requesting shad Restricted parking? 5. Landscaping: A. Are there any prom	nared parking or a	parking reduction? If yes, how many spa	OYes OYes OYes	●No ●No	; O _{No}	
Are you requesting shad Restricted parking? 5. Landscaping: A. Are there any promation B. Type:	ared parking or a inent trees or area Trees	parking reduction? If yes, how many spa	OYes OYes OYes	●No ●No	; O _{No}	
Are you requesting shad Restricted parking? 5. Landscaping: A. Are there any promation B. Type: C. Size: D. General Location:	inent trees or area Trees 1 1/2"	parking reduction? If yes, how many spa	OYes OYes OYes	●No ●No	; Ono	
Are you requesting shad Restricted parking? 5. Landscaping: A. Are there any promation B. Type: C. Size: D. General Location:	inent trees or area Trees 1 1/2"	parking reduction? If yes, how many spa	OYes OYes OYes	●No ●No	; Ono	
Are you requesting shad Restricted parking? 5. Landscaping: A. Are there any promation B. Type: C. Size: D. General Location: 6. Mechanical Units:	inent trees or area Trees 1 1/2" Frontage along	parking reduction? If yes, how many spa	OYes OYes OYes	●No ●No	; Ono	
Are you requesting shad Restricted parking? 5. Landscaping: A. Are there any promation B. Type: C. Size: D. General Location: Number of Units:	inent trees or area Trees 1 1/2" Frontage along	parking reduction? If yes, how many spans of vegetation on the Parkcenter	OYes OYes OYes	●No ●No	S ONO	
Are you requesting shad Restricted parking? 5. Landscaping: A. Are there any promation B. Type: C. Size: D. General Location: 6. Mechanical Units: Number of Units: Unit Location:	inent trees or area Trees 1 1/2" Frontage along	parking reduction? If yes, how many spans of vegetation on the Parkcenter	OYes OYes OYes	●No ●No	; Ono	

17.Solid Waste	2:		
A. Type of	trash receptacles:		
_	Individual Can/Residential 3 Yd. Dumpster 6 Yd. Dumpster 8 Yd. Dumpster Compactor		
B. Number	of trash receptacles:	1	
C. Propose	ed screening method:	CM	4U Enclosure
D. Is the p (Contact B	proposed location accessible for oloise Public Works at 384-3901.)	collection?	Yes O _{No}
E. Is recyc	ling proposed?	•	Yes ONo
18.Irrigation D	Oitches/Canals:		
A. Are then property?	re any irrigation ditches or canal	s on or adjacent to	the Oyes ONo
B. Location	n:		na
C. Size:			na
19.Fencing:			
	Proposed	Existing to Remain	
Type:	none	na	
Height:	na	na	
Location:	na	na	
20.Loading Fac	cilities (if proposed, for commerc	ial uses only):	
Number:	none		
Location:	na		
Size:	na		
Screening:	na		
21.Drainage:			
Proposed r	method of on-site retention:	on site seepa	age beds
22.Floodways	& Hillsides:		
A. Is any p	portion of this property located in	a Floodway or a 1	00-year Floodplain? Oves ONo
B. Does an	ny portion of this parcel have slo	pes in excess of 15°	%? Oyes ONo
	e answer to either of the above i and additional fee.	s yes, you will be re	equired to submit an additional #112 Floodplain and/or #114 Hillside
23.Airport Infl			
Is the subj	ject site located within the Airpor	t Influence Area? ((If yes, please mark which area.)
⊚ _{No} C	Area A OArea B OArea	B1 OArea C	

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:	