

**Submittal Fee: \$30**



# City of Kuna Commercial Building Permit Application

City of Kuna  
P.O. Box 13  
Kuna, Idaho 83634  
Phone: (208) 922-5274  
Fax: (208) 922-5989  
Kunacity.id.gov  
[permits@kunaid.gov](mailto:permits@kunaid.gov)

OFFICE USE ONLY:
1 <sup>st</sup> Review By: _____
2 <sup>nd</sup> Review By: _____

<p><b><u>New Construction</u></b></p> <ul style="list-style-type: none"> <li>*Three (3) complete sets of stamped plans (by ACHD &amp; Fire Department)</li> <li>*Three (3) 8 ½ X 11” site plans</li> <li>*Three (3) 8 ½ X 11” floor plans</li> <li>*Copy of ACHD Impact Fee Certificate</li> <li>*Two Copies of Comm. Check</li> </ul>
--

<p><b><u>Tenant Improvement/Remodel/Addition</u></b></p> <ul style="list-style-type: none"> <li>*Four (4) complete sets of plans;</li> <li>*Two (2) of the 4 stamped by ACHD &amp; Fire Department</li> <li>*Four (4) 8 1/2 X 11” site plans</li> <li>*Four (4) 8 ½ X 11” floor plans</li> <li>*Copy of ACHD Impact Fee Certificate</li> <li>Approx. Construction Cost</li> </ul>
---

\*All Plans must be stamped by ACHD and by the Fire District before submittal.

\*Contractor License #: \_\_\_\_\_

\*Parcel#: \_\_\_\_\_ Zone: \_\_\_\_\_

\*Legal Description: \_\_\_\_\_

\*Site Address: \_\_\_\_\_

\*Applicant Name: \_\_\_\_\_ \*Phone: \_\_\_\_\_

\*Applicant Address: \_\_\_\_\_ \*City: \_\_\_\_\_ \*Zip: \_\_\_\_\_

\*Email Address: \_\_\_\_\_

**\*Required Information**

New	Foundation	Mechanical	Addition	Plumbing
Re-Model	Accessory Building	Tenant Improvement	Other	Electrical

**Note:** Once plans have been checked and approved for issuance the applicant **MUST** pick up the building permit within **30 days** or the plans will be destroyed. Per IBC 2015 regulations, work must commence or resume within 180 days or permit is invalid. Building Official may grant time extensions prior to expiration.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

### FEES

	WATER	SEWER	IRRIGATION	MECH.	RES ✓	PERMIT	ELEC	PLUM	ZONING	TOTAL DUE
# FEES										
PER UNIT										
TOTAL										

### CONSTRUCTION INFORMATION

	FLOOR AREA	CONSTRUCTION CLASS.	OCCUPANCY CLASS.	DESIGN OCCUPANT LOAD
AREA 1				
AREA 2				
AREA 3				

### PLAN REVIEW INFORMATION

BUILDING PERMIT #	SITE ADDRESS	APPROX. CONSTRUCTION COST

STAFF RECIPIENT/CREATED  
BY: (Initial/Date) \_\_\_\_\_ / \_\_\_\_\_