

Fremont County
Planning & Building Department
125 N. Bridge St. Suite 1
St. Anthony, ID 83445
(208)624-4643 Office
(208)624-1320 Fax

HOME OCCUPATION/TRANSIENT RENTAL

CLASS I PERMIT

Permit #	
RA:	
Date:	
Fee \$195:	

THIS FORM MUST BE FILLED OUT COMPLETELY

SUBMITTAL: The review process	will require 7-10 working		
	SECTION 1: OWNE	R INFORMATION	
OWNERS: Name: Address: City: Telephone: Email:	Zip:	Address: City: Telephone: Email:	State:Zip: Fax
Legal Description: Section	SECTION 2: PROP		<u> </u>
Parcel NumberOwner Name:	Site Address: _	Telephone:()
Address:City:		State:	Zip:
I consent to filing this applied property for site inspections I certify that I have the legal I certify that this application including easements, CC&R	related to this applicati I right to make this appl I does not violate any co	on. ication and to carry out th ontractual restrictions on t	his use if approved. The use of this property
Signature (Owner)	Date	Signature (Applicant)	Date
 I declare, under penalty of p in this application – along w I acknowledge that any mate permit if approved. 	vith any information that	t I will provide in support	of it – is true and correct.

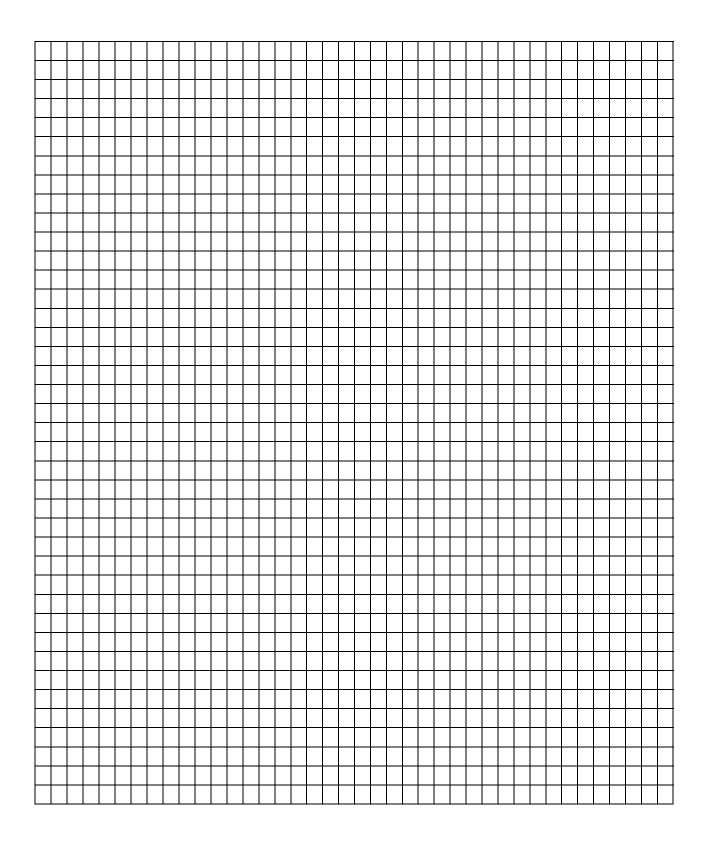
SECTION 4: SUBMITTALS			
	DETAILED LETTER by applicant explaining the Home Occupation application. PROOF OF OWNERSHIP SCALED SITE PLAN showing all structures and the items noted below: Verified access to public road Well Location/Separation Septic/Sewer Locations Required designated parking areas Setback from property lines Solid waste disposal area Location and dimension of proposed sign Eastern Idaho District Health Department/septic system form completed – 208-624-7585 Floor Area How many employees will this generate? What types of traffic will this generate? Identify location and dimensions of required parking and unloading areas (see Appendix C) For Transient Rentals, identify a contact person or agent within the local Fremont County calling area		
rea	asonable available by phone to respond to problems.		
	SECTION 5: ADDITIONAL SUBMITALS		
	For Residential Care Facilities with eight (8) or fewer residents and two (2) or fewer resident staff, attach any Required certifications or licenses.		
	For home occupations served by municipal water service, submit written evidence from the service provided that the service account is in good standing and of adequate service capacity for the proposed home occupation use.		
	For home occupations served by either a private or community well, submit the results of a water sampling test from a professional water testing service or laboratory of water drawn from inside the dwelling.		
	For home occupations served by a municipal or county sewer system, submit written evidence from the Service provided that the service account is in good standing and of adequate service capacity for the proposed home occupation use.		
	For home occupations served by either a private or community septic system, submit the results of both a "condition" evaluation and a capacity "evaluation" on a form provided by the county.		
	For transient rental use, certify that you understand the Fremont County Open Burning Ordinance.		
Si	gnature: (Owner/Applicant) Date:		
	Provide your Idaho State Tax Commission Registration number and Travel and Convention Tax Collection number (Failure to collect and remit any and all applicable sales and use taxes may result in permit suspension or revocation).		

ONSITE REQUIREMENTS:		
	For transient rentals only, the name and phone number of the contact person shall be posted inconspicuously on the transient rental building, but where a neighbor can easily read it.	
	Install, test, and maintain smoke detectors, carbon monoxide detectors, and fire extinguishers specific to the proposed home occupancy use, per manufacturer's instructions and as required by code.	
	For transient rental use only, post the Open Burning Ordinance in a conspicuous place and inform all quests, tenants, lodgers, and visitors of the ordinance and its consequences.	
	Place a sufficient number of suitable garage receptacles in an area not readily visible from the street (except on collection days) and provide for weekly waste collection. Trash in plastic bags shall not be placed outside of garbage receptacles and where applicable, animal and pest-proof garage receptacles must be used. (There shall not be any noise, litter, or odor noticeable at or beyond the property line resulting from the use of the dwelling for home occupancy.)	
	Provide off-street parking for all employees, guests, lodgers, visitors, etc., and any vehicle associated with the home occupation in compliance with Appendix C. All camper trailers, boat trailers, utility trailers, transport trailers, or any other type of trailer must also be parked off-street.	
	Address, phone number and basic property access directions to be posted on the inside front door and adjacent to the primary phone for all vacation rental properties.	

Detailed Sketch Plan:



Please draw to scale and label all buildings, roads, parking areas, rivers, creeks, fence, easements, location of bear proof garbage containers, buffering, the distance to property lines from primary location, etc.



OFFICE USE ONLY				
PERMIT:	RECEIVED BY:	DATE:		
PERMIT APPROVE	D BY:	DATE:		
COMMENTS:				
Condition of Approve	al:			
District	CODE COMPLIANCE CHECK a. Smoke Detectors b. Carbon Monoxide Detectors c. Fire Extinguishers d. Open Burn Ordinance Acknowledgeme e. Solid Waste Provider/Provided Weekly f. County Inspection i. Letter of Deficiency Sent: ii. Carbon Monoxide Detectors iii. Fire Extinguishers g. Sign Compliance Check i. Contact information Sign ii. Advertising Signs			