| STATE OF IDAHO DIVISION OF OCCUPATIONAL ANI |
|---|
| PROFESSIONAL LICENSES                       |

P.O. BOX 83720 Boise, Idaho 83720-0063 (208)334-3950

# APPLICATION FOR CONTRACTOR PERMIT

### dopl.idaho.gov dbs.idaho.gov

| As of J   | anuary 1, 2023, all per  | mits will need to be                                | e purchased O                          | nline at DBS.IDAHO.G                                       | ov                               |
|---|--|---|--|--|----------------------------------|
|   |  |   |  | P#   | DOPL use only                    |
|   |  |   |  | Date:  |                                  |
|   | tion completely and subm<br>f Occupational and Profes          |   |  |  |                                  |
| COMPANY NAME:   |  |   |  | LICENSE # :  |                                  |
| MAILING ADDRESS:  |  |   |  |  |                                  |
| CITY:   |  | STATE   | E:                                     | ZIP:   | <u>.</u>                         |
|   |  |   |  |  |                                  |
| EMAIL ADDRESS:  |  |   |  |  |                                  |
|   | ABOVE INFORMATION T  | O BE UPDATED ON N                                   | IY LICENSE REC                         | CORD.  |                                  |
|   | SELECT THE ME  | THOD YOU WISH T                                     | O RECEIVE YO                           | UR PERMIT:   |                                  |
|   | (Please Circle One):   | EMAIL   | MAIL                                   |  |                                  |
| DESCRIPTION OF W  | ORK:   |   |  |  |                                  |
|   |  |   |  |  |                                  |
| CITY:   |  | ZIP:  |  | COUNTY:  |                                  |
| DIRECTIONS TO JOB   | SITE:  |   |  |  |                                  |
| (If known) LOT:   | BLOCK:   | SUBDIVISI   | ON:                                    |  |                                  |
| AN ADDITIC  | DNAL \$65 FEE MAY BE ASS                                       | ESSED if the location is n                          | not clearly given eith                 | er by directions or an attache                             | d map.                           |
| We Accept: cash, check, mo<br>payable to the Division of Oc | ney order, Visa and MasterCa<br>ccupational and Professional   | ard Make checks<br>Licenses (DOPL)                  | GRAND 1                                | OTAL FEES PAID*  |                                  |
| *Please use the worksh                                      | eet on page 2 to determ  | nine the total fees an                              | d enter the amo                        | unt to be paid here.                                       |                                  |
| PUBLIC RECORDS N<br>information according to the lo         | <b>OTICE</b> — Business inform<br>daho Public Records Act. You | nation such as your con<br>r business address and p | npany address and<br>hone number may b | phone number is regarded<br>e provided to a third party up | as public<br>on written request. |
|   | ICATION IS NOT AN  | INSPECTION RE                                       | QUEST                                  |  |                                  |
| AS OF JANUARY 1,  | 2023, ALL PERMITS  | WILL NEED TO  | BE PURCHAS                             | ED ONLINE AT DB  | 3.IDAHO.GOV                      |
| SIGNATURE:  |  |   | DA                                     | TE:  |                                  |

PRINTED NAME: \_\_\_\_\_

DIVISION OF OCCUPATIONAL & PROFESSIONAL LICENSES

**NPI** 



#### STATE OF IDAHO DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES

P.O. BOX 83720 Boise, Idaho 83720-0063 (208)334-3950 <u>dopl.idaho.gov</u> <u>dbs.idaho.gov</u>

# ELECTRICAL PERMIT WORKSHEET (FEE SCHEDULE)

This worksheet must accompany the Contractor Application. Use this worksheet to calculate the fees and transfer the grand total to the application.

| RESIDENTIAL  | Total \$ |  |  |  |
|--|----------|--|--|--|
| Temporary Construction Services ONLY (200 amp or less, one location): \$65   | \$       |  |  |  |
| New Residential: Single Family Dwelling, including all associated outbuildings in connection with primary or secondary residence.     * Based on living space (see definition below)   |          |  |  |  |
| <ul> <li>□ Up to 1,500 sq.ft. \$130</li> <li>□ 1,501 to 2,500 sq.ft. \$195</li> <li>□ 2,501 to 3,500 sq.ft. \$260</li> <li>□ 3,501 to 4,500 sq.ft. \$325</li> <li>□ Over 4,500 sq.ft. \$325 plus \$65 for each additional 1,000 sq.ft. or portion thereof \$325 + ( \$65 x # of additional 1,000 sq.ft. or portion thereof )</li> </ul>  | \$       |  |  |  |
| • Manual S, J, & D Review - \$25 (Required when installing the primary heating and/or cooling system)  |          |  |  |  |
| New: Multi-Family Dwelling   |          |  |  |  |
| <ul> <li>□ Duplex Apartment \$260</li> <li>□ Three or more multi-family units: \$130 per building plus \$65<br/>per unit (\$130 x <u># of buildings</u>) + (\$65 x <u># of units</u>)</li> </ul>   | \$       |  |  |  |
| <ul> <li>Existing Residence D Modular, Manufactured or Mobile Homes D Detached Shop:</li> <li>\$65 fee plus \$10 per additional branch circuit, up to the maximum of the corresponding sq.ft. of the building (one circuit is included in the \$65.00)</li> <li>\$65 + (\$10 x # of additional branch circuits )</li> </ul>  | \$       |  |  |  |
| Residential Electric Space Heating and Air Conditioning  | \$       |  |  |  |
| • Pumps-Water, Irrigation, Sewage (each motor):<br>\$65 up to 25HP<br>\$95 - 26 to 200HP<br>\$130 over 200HP<br>Phase inverters and roto phase equipment, please use the Other Installation including Commercial/Industrial fee<br>in addition to the pump motor fee.  | \$       |  |  |  |
| Residential Spas, Hot Tubs, Hydro Massage Tubs and Swimming Pools: \$65 fee for each trip to inspect     Use Other Installations below for non-residential installations   | \$       |  |  |  |
| • Signs/Outline Lighting:  □ Signs - \$65 per sign  □ Outline Lighting - \$65 per occupancy  | \$       |  |  |  |
| Temporary Amusement: \$65 fee plus \$10 per ride, concession, orgenerator     \$65 + (\$10 x # of ride/concession/generator)   | \$       |  |  |  |
| Irrigation Machine: \$65 for center pivot plus \$10 per tower or drive motor     \$65 + (\$10 x # of tower/drive motor)  | \$       |  |  |  |
| <ul> <li>Requested Inspection         (Findings or Inspector Consultation) Contractor cannot call in for power off over 1 year.     </li> </ul>  | \$       |  |  |  |
| • Small Works: \$10 fee for work not exceeding \$500 in cost and not involving a change in service connections.<br>This Permit is not applicable to those installations where an inspection is required or requested; no inspection  | φ        |  |  |  |
| is included in the \$10 fee.   | Ψ        |  |  |  |
| OTHER INSTALLATIONS including COMMERCIAL/INDUSTRIAL/SOLAR/RENEWABLE ENER   |          |  |  |  |
| <ul> <li>The fees listed under this inspection type shall apply to any and all electrical installations not specifically mentioned elsewhere on this form. This shall include all labor, materials, equipment, overhead and profit, as well as all labor, materials, and equipment supplied by others. The project value cannot be reduced by labor, material or equipment that is donated or supplied by others. At the time of "Final" inspection, the Scope of Work, valuation, and permit fees will be verified.</li> <li>Check here if this is a Solar, Renewable Energy, power generation, power production, or energy storage systems:</li> </ul> | \$       |  |  |  |
| Total cost of electrical system (Job Value Amount): \$   |          |  |  |  |

GRAND TOTAL: \$\_\_\_\_

Please transfer this fee to your application

\* Living Space – space within a dwelling unit intended for human habitation which may reasonably be utilized for sleeping, eating, cooking, bathing, washing, recreation, and sanitation purposes. An unfinished basement is considered part of the living space.

## STATE OF IDAHO DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES



### **CREDIT CARD AUTHORIZATION FORM**

Idaho Division of Occupational and Professional Licenses P.O. BOX 83720 BOISE, ID 83720-0063 Phone:(208)334-3950 Email: customer-service@dopl.idaho.gov

Please email or mail all license applications, permit applications, fees, or forms to the Boise office.

| Ι                                |                                  | , at   | uthorize The State of Idaho,                           |  |  |
|----------------------------------|----------------------------------|--|--|--|--|
|                                  | (Please Print Card Holders Name) |  |  |  |  |
| <b>Division of Occupa</b> of \$  |                                  | <b>censes,</b> to charge my credit ca            | rd account in the amount                               |  |  |
| This payment is for              | (Individual/Company's name       | payment needs to be applied towards              |  |  |  |
| □ Elevator Fee – State ID Number |                                  |  |  |  |  |
| Permit Number                    |                                  | $\Box$ Application: $\Box$ PERMIT $\Box$ LICENSE |  |  |  |
| □ NOV Case Num                   | ber                              | □ Other  | Other  |  |  |
| Cardholder's Signature           |                                  |  | Date   |  |  |
| ll Fields Below Are Requ         | ired                             |  |  |  |  |
| □ VISA                           | □ MASTERCARD                     | □ DISCOVER                                       | □ AMERICAN EXPRESS                                     |  |  |
|                                  | Debit Cards                      | Accepted – Processed as a Cr                     | redit  |  |  |
| Credit Card Number               | r:                               |  |  |  |  |
| Billing Address Zip              | Code:                            |  |  |  |  |
| Expiration Date:/                |                                  | CVC #  |  |  |  |
|                                  |                                  | (CVC: Card Verification Code) th                 | is is the 3digit code located on the back of your card |  |  |
| Contact Phone Num                | ber                              |  |  |  |  |

Please note there is an additional 3% charge for the use of your card through Access Idaho.