

STATE OF IDAHO DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES

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

APPLICATION FOR CONTRACTOR PERMIT

For quicker service, Permits and In	spections can be	obtained Online	e, please go to DBS.I C	AHO.GOV	DOPL use only
					P#
					Date:
Please fill out this application completel the Division of Occupational and Profes					
COMPANY NAME:				LICENSE	E # :
MAILING ADDRESS:					
CITY:		s	TATE:	ZIF	D:
PHONE:					
EMAIL ADDRESS:					
□□ I WOULD LIKE THE ABOVE	INFORMATION T	O BE UPDATE	D ON MY LICENSE R	ECORD.	
SEI	ECT THE MET	HOD YOU W	SH TO RECEIVE Y	OUR PERMI	T:
(Please Ci	rcle One):	EMAIL	MAIL		
DESCRIPTION OF WORK:					
JOB SITE ADDRESS:					
CITY:			IP:		Y:
DIRECTIONS TO JOB SITE:					
(If known) LOT:	BLOCK:	SUBD	IVISION:		
(<u></u>					
AN ADDITIONAL \$65 FEE MAY BE AS	SSESSED if the loc	ation is not clearly	given either by directions	s or an attached	I map.
THIS PERMIT APPLICATION I	S NOT AN INSI	PECTION REC	QUEST		
We Accept: cash, check, money order, payable to the Division of Occupational			GRAND TO	TAL FEES F	PAID*
*Please use the worksheet on p	age 2 to determ	nine the total f	ees and enter the an	nount to be p	paid here.
PUBLIC RECORDS NOTICE according to the Idaho Public Records A					
DATE:					
D/((L	_				
SIGNATURE:			PRINTED NAME:		



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PLUMBING PERMIT WORKSHEET (FEE SCHEDULE)

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

DEC	INE	NIT	ΙΛΙ
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ALSIDENTIAL		
New: Single Family Dwelling, including all buildings with plumbing being constructed on each property.		
* Based on living space (see definition below)		
o Up to 1,500 sq.ft. \$130		
o 1,501 to 2,500 sq.ft. \$195 Total Square Footage	•	
o 2,501 to 3,500 sq.ft. \$260	Φ	
o 3,501 to 4,500 sq.ft. \$325		
o 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)		
Hydronic / Fuel gas piping system \$130	\$	
Manual S, J, & D Review \$25 (Required when installing the primary heating and/or cooling system)	\$	
*Living Space – space within a dwelling unit utilized for sleeping, eating, cooking, bathing, washing, recreation, and sanitation purposes. An unfinished basement is considered part of the living space.	on	
New: Multi-Family Dwelling		
o Duplex Apartment \$260	\$	
o Three or more multi-family units: \$130 per building plus \$65 per unit (Contractors Only)		
(\$130 x <u># of buildings</u>) + (\$65 x <u># of units</u>)		
Existing:		
□ Residence: \$65 fee plus \$10 per additional fixture. Fee shall not exceed 'New' square footage fee		
□ Detached Shop: \$65 fee plus \$10 per additional fixture. Fee shall not exceed 'New' square footage fee		
□ Gas Line: \$65		
☐ Hydronics: \$65		
Sewer & Water: □ \$65 Sewer Line □ \$65 Water Line □ \$65 Sewer & Water – if inspected at the same time	\$	
☐ \$65 Sewer turnaround/domestic water (change from septic to city, water re-pipe under house)	Ψ	
☐ Modular, Manufactured or Mobile Homes: \$65 for sewer and water stub connections		
☐ Lawn Sprinklers: \$65		
☐ Fire Sprinkler: \$65 fee or \$4 per sprinkler head, whichever is greater		
☐ Requested Inspection: \$65		
☐ Water Heater Replacement (only): \$65		
☐ Water Conditioning Equipment: \$65		
□ Plan Check: \$65 per hour		

COMMERCIAL/INDUSTRIAL

 The Inspection fees listed in this Section shall apply to any and all plumbing installations not specifically mentioned elsewhere in this schedule. The plumbing cost shall be the cost to the owner of all labor charges and all other costs that are incurred in order to complete the installation of any and all plumbing equipment and materials installed as part of the plumbing system. Total cost of plumbing system (Job Value Amount): 		
□ Up to \$10,000: $(total cost of system \times 0.02) + 60 = \$$ □ Between \$10,001 - \$100,000: $((total cost of system - 10,000) \times 0.01) + \$260 = \$$ □ Over \$100,001: $((total cost of system - 100,000) \times 0.005) + \$1,160 = \$$		

GRAND TOTAL: \$

Please transfer this fee to your application

STATE OF IDAHO DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSES



CREDIT CARD AUTHORIZATION FORM

Idaho Division of Occupational and Professional

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

Please email or mail	l all license applications, perm	nit applications, fees, or form	s to the Boise office.	
Ι	(Please Print Card Holders Name)	, au	thorize The State of Idaho,	
Division of Occupa of \$	tional and Professional Lice	nses, to charge my credit care	d account in the amount	
This payment is for				
1 7	(Individual/Company's name pa	yment needs to be applied towards.)		
□ Elevator Fee – State ID Number		□ License Fee – License Number		
□ Permit Number		□ Application : □ PERMIT □ LICENSE		
□ NOV Case Number		□ Other		
Cardholder's Signature			Date	
ll Fields Below Are Requ	ired			
□ VISA	☐ MASTERCARD	□ DISCOVER	☐ AMERICAN EXPRESS	
	Debit Cards A	ccepted – Processed as a Cre	edit	
Credit Card Number	 			
Billing Address Zip	Code:			
			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.

8/16/2022 DOPL CC AUTH form