



DEVELOPMENT SERVICES DEPARTMENT

6015 Glenwood Street ■ Garden City, Idaho 83714
 ■ planning@gardencityidaho.org ■ www.gardencityidaho.org
 ■ Phone 208/472-2921 ■ Fax 208/472-2996

DESIGN PROFESSIONAL CERTIFICATION VERIFYING THE PROJECT HAS BEEN CONSTRUCTED IN COMPLIANCE WITH THE SUBMITTED AND APPROVED PLANS

Landscaping and Design

NOTE: Any changes to the approved plans must be submitted for plan modification review and approval to building@gardencityidaho.org prior to completion of this report.

Permit No.: _____ Project Name: _____

Design Professional Name: _____ License Number: _____

Company: _____

Use

I have verified that the intended use has not changed. Yes _____, No _____

Landscaping

Landscaping required					
Number of street trees required by code	Number of street trees planted	Square footage of landscape area required	Square footage of landscape area provided	Number of shrubs required by code	Number of shrubs planted

Plantings					
Number shown on plans	Number Planted	Approved Species	Planted Species	Class (if tree)	Planting size (required to be 2" or > caliper tree or 2 gallon or greater shrub)

1. Has there been any change to any of the approved species? Yes ____, No ____

2. If yes, what were the changes?

Sidewalk

1. I have verified that 5' sidewalks that are ADA compliant have been installed. Yes ____, No ____. Sidewalk was preexisting ____.

2. Are the sidewalks installed as detached by at least 6' with street trees in the buffer strip? Yes ____, No ____. Sidewalk was preexisting _____. Another sidewalk configuration was approved _____.

Floodplain

1. This project is in the floodplain Yes ____, No ____

If yes:

2. Amount of foundation venting required _____.
Amount of venting provided _____.

3. I have verified that there is no utility or livable space below 2' above BFE. Yes ____, No ____

Comment _____

Parking Spaces

1. Number of parking spaces on approved plan _____.
Number of ADA parking spaces on approved plan _____.

2. Number of parking spaces provided _____.
Number of ADA parking spaces provided _____.

3. The ADA space is painted, signed, contains an ADA compliant route, and the grade and width has been verified. Yes _____, No _____
There are no non-residential uses in this project. Yes _____, No _____

Comments: _____

Setbacks

1. I have verified the property lines. Yes _____, No _____
2. I have verified the easement boundaries. Yes _____, No _____
3. *I have verified the structural setbacks (including all portions of the structure) from the property lines are as noted below. Yes _____, No _____
4. I have verified that no structure or portion there-of has been built in any easement. Yes _____, No _____
5. I have verified that no structure or portion there-of is within 70' of the ordinary high-water mark. Yes _____, No _____
6. I have verified that no structure or portion there-of is riverside of the greenbelt. Yes _____, No _____
7. I have verified that no structure or portion there-of is in the floodway or in a wetland. Yes _____, No _____

*For building permits please indicate the below:

1. The front elevation is the _____ (north, east, south, west) elevation, the rear is the _____ elevation, the sides are the _____ and _____ elevations.
2. The smallest setback of all portions of the structure (including steps, eaves, etc.) is Front _____, Rear _____, Side _____, Side _____.
3. What are the structural setbacks (including all portions of the structure) from the property lines? Front _____, Rear _____, Side _____, Side _____

Comments _____

Building Elevations:

1. I have verified that there has been no change to the building elevations including materials, size of windows, aesthetics, or location of windows and design features Yes _____, No _____.

Conditions of Approval

1. I have reviewed and verified that each condition of approval in the decision corresponding decision document has been met Yes _____, No _____.

