



CITY OF IONA

3548 N. Main Street
Iona, Idaho 83427

(208) 523-5600

cityclerk@cityofiona.org

HVAC & Plumbing Inspector: Greg McBride 208-569-4750

APPLICATION FOR PERMIT FOR SPRINKLER SYSTEM

Iona City Code § 8-2-13(D) [Application Fee: \$85]

APPLICANT INFORMATION

Applicant's Full Name: _____
Applicant's Mailing Address: _____
Applicant's Telephone: (____) _____ Applicant's Email: _____

WORK SITE INFORMATION

Iona Location: Same as Mailing Address Other: _____
Is the Applicant the owner of the Property? Yes No (If, no, please include owner's consent, below)
Who will be performing the Plumbing Work? Property Owner (skip next section) Contractor

CONTRACTOR INFORMATION (if applicable)

Name (incl. business entity or d/b/a): _____
Principal Business Address: _____
Business Telephone: (____) _____ Contractor's License No.: _____

TO COMPLETE THIS APPLICATION, please attach a detailed description of the sprinkler system to be installed, connected, or altered—including the specific location and configuration of all Backflow Prevention Assemblies and devices installed in conjunction therewith.

<i>I certify (or declare) under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.</i>	
Signature: _____	Date: _____

_____ Initial Here - I will submit the Backflow Test Results to the city of Iona
Email cityclerk@cityofiona.org or bring it in to the office.

OFFICE USE ONLY	
Accepted by: _____	Date: _____
<input type="checkbox"/> \$65 Fee Received	Permit Number: SPKL-_____
<input type="checkbox"/> Sprinkler System Reviewed	Council Meeting: _____