



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

**CLASS II PERMIT**

**APPEAL**

Proper fee paid which varies with type of Appeal

Permit # \_\_\_\_\_

RA: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_

**SUBMITTALS:**

- Detailed letter by the applicant describing the request or project.
- Meets and bounds legal description of the property including a Microsoft Word® electronic word document to be provided at the time of acceptance.
- Parcel Map. Available from the Assessor's office.
- Warranty deed or evidence of the proprietary interest.

**SITE INFORMATION:**

Location: Quarter: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Total Acres \_\_\_\_\_  
 Site Address (Maybe issued if a Building Permit is applied) \_\_\_\_\_  
 Tax Parcel Number(s): \_\_\_\_\_ District \_\_\_\_\_ Assessor's Categories \_\_\_\_\_

**OWNERS:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**APPLICANT:**

Name \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

I consent to this on-site review and allow Planning and Building Staff to enter the property for site inspections related to this application.

I certify information is correct to the best of my knowledge.

\_\_\_\_\_  
**Signature: (Owner)**

\_\_\_\_\_  
**Signature: (Applicant)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

