Date: 5/23/2016



Planning Commission

Page 1 of 2

Land Use Permit

Printed: 5/23/2016

Permit Number:

LUP390-2016

Applicant

Owner

Name:

SOURDOUGH WILDERNESS RANCHIANGE:

SOURDOUGH WILDERNESS R.

Address:

2732 North Highway 39

Address:

2732 North Highway 39

Phone:

801-668-1607

Phone:

Parcel

Parcel Number: 230130010 Zoning: F-40

Total Parcel Area: 5017

(*If Zoned S-1, See Specific Height Requirements)

Address: 2732 NORTH HIGHWAY 39

HUNTSVILLE, UT 84310

**See Diagram on Back Side for Setbacks

Section: 4,5,8,9 417 Township:

Range: 3E

Subdivision:

Sourdough

Lot(s): 71

Proposed Structure:

Storage Shed

Structure Area Used:

100

Is Structure > 1,000 Sq. Ft.?

*If True, Need Certif. Statement

7N

of Dwelling Units: 0

of Accessory Bldgs: 1

Off-Street Parking Regd: 0



Permit Checklist:

Public by/Right of Use Road?

> 200 ft. from Paved Road?

Yes

< 4218 ft. above Sea Level?

Yes

Wetlands/Flood Zone? No

Culvert Required?

No

If Yes, Culvert Size:

*Any Work in the Right of Way requires an Excavation Permit

Additional Frontage Reqd.?

No

OR Special Exception?

Case #

Meet Zone Area & Frontage?

True

Hillside Review Regd.?

Case #

Culinary Water District:

NA

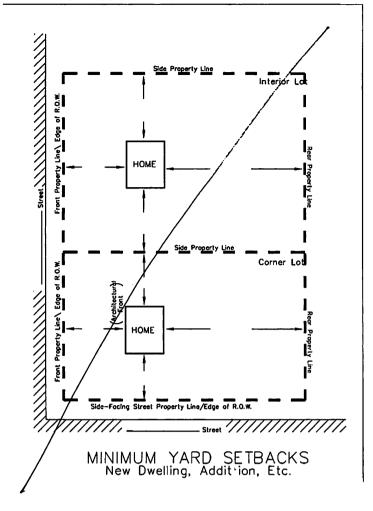
Waste Water System:

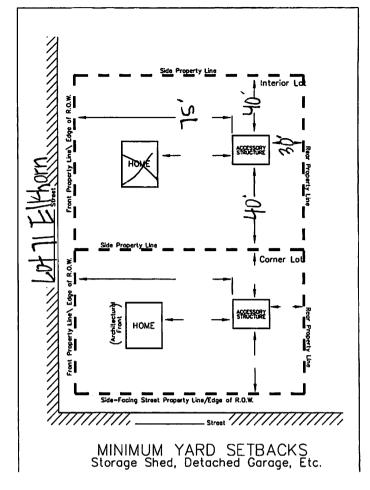
NA NA

Comments: This permit is for a 10'x10' shed in the Sourdough Wilderness Ranch Lot 71 Elkhorn for Kellie Anderson

Structure Setback Graphic:

Storage Shed, Detached Garage, et





Interior Lo HOME Corner Lot Property Line\ Edge HOME MINIMUM YARD SETBACKS Barn, Corral, or Stable

NOTICE FOR APPLICANT (Please Read Before Signing)

Proposals for the installation of an individual water supply and for a sanitary waste disposal system (septic tank) for any structure designed for human occupation must be approved by the Weber County Health Department prior to installation.

Planning Dept. Signature of Approval

This permit becomes null and void if use or construction authorized has not commenced within 180 days or if there is a zone change affecting this property. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this land use will be complied with whether specified herein or not. I make this statement under penalty of perjury. I hereby agree to make the requirements as specified on this permit issued to the owner of land as signed below.

5/23/16 Contractor/Owner Signature of Approval Date

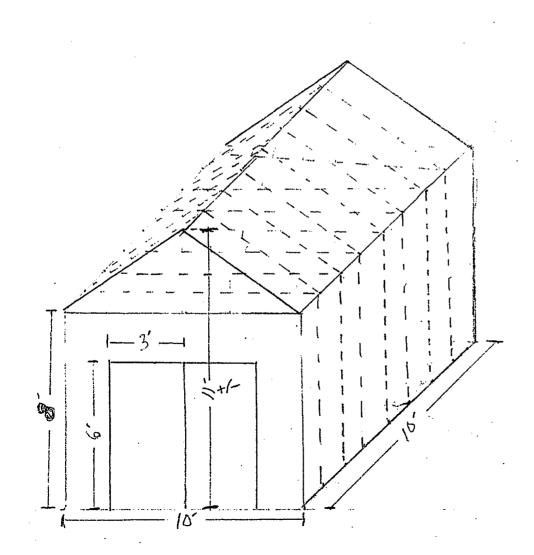
	194 1 · 10 · 10 · 10 · 10 · 10 · 10 · 10 ·	ommended to be submitted with an ap shington Blvd. Suite 240, Ogden, UT 8	· Control of the second of the		
Date Submitted / Completed	Fees (Office Use)	Rec	Receipt Number (Office Use)		
Property Owner Contact	t Information				
Name Kellie Anderson		Mailing Address			
Phone	Fax				
801-668-1607 imail Address		Preferred Method of Written C	Correspondence		
Kbradford @	Smail com	Email Fax	Mail		
Authorized Representat	tive Contact Information				
Name of Person Authorized to Re	epresent the Property Owner(s)	Mailing Address of Authorized	Mailing Address of Authorized Person		
Phone	Fax				
Email Address	mail Address		Preferred Method of Written Correspondence Email Fax Mail		
Property Information					
Hundrich 1)	wilderness Ranch Highway 39 + 84317	0 0 010 00	11.0		
Subdivision Name EIKhorn Culinary Water Provider VA	Secondary Water Provider	Current Zoning Waste Water Provider NA	Acreage /2 Frontage		
Subdivision Name EIKhorn Culinary Water Provider NA Detailed Description of Proposed	Secondary Water Provider Ad Use/Structure	Current Zoning Waste Water Provider WA	Acreage /2 Frontage		
Subdivision Name ENKNOWN Culinary Water Provider VA Detailed Description of Proposed Property Owner Affiday I (We), Bud	Secondary Water Provider A Use/Structure Tit A A Gept	Current Zoning Waste Water Provider WA DUM HOA APPINA Ose and say that I (we) am (are) the owner	Acreage /2 Frontage		
Culinary Water Provider Culinary Water Provider A Detailed Description of Proposed Property Owner Affidav I (We), and that the statements herein my (our) knowledge.	Secondary Water Provider Add Use/Structure Tit Add Add Add Add Add Add Add Add Add Ad	Current Zoning Waste Water Provider WA DUM HOA APPINA Ose and say that I (we) am (are) the owner	Frontage Frontage er(s) of the property identified in this application are in all respects true and correct to the best of		
Property Owner Affidav I (We), Bull and that the statements herein my (our) knowledge.	Secondary Water Provider Add Use/Structure Tit Add Add Add Add Add Add Add Add Add Ad	Waste Water Provider WA Waste Water Provider WA Ough HOA apploy ose and say that I (we) am (are) the owner in the attached plans and other exhibits Waste Water Provider WA Over Honor (Property Owner)	Frontage Frontage er(s) of the property identified in this application are in all respects true and correct to the best of		

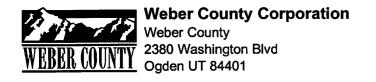
We),	the owner(s) of the real property described in the attached application, do authorized as my to represent me (us) regarding the attached application and to appear on legislative body in the County considering this application and to act in all respects as our agent in matters			
operty Owner)	(Property Owner)			
perty Owner,	(Floperty Owner)			
ted thisday of ner(s) of the Representative Authorization A	20, personally appeared before me ffidavit who duly acknowledged to me that they executed the same.	, th		
	·	(Notar		
·				

Weber County Land Use Permit Application Application submittals are recommended to be submitted with an appointment. (801) 399-8791. 2380 Washington Blvd. Suite 240, Ogden, UT 84401 Date Submitted / Completed Fees (Office Use) Receipt Number (Office Use) **Property Owner Contact Information** Mailing Address Name Phone **Email Address** Preferred Method of Written Correspondence Fax **Authorized Representative Contact Information** Name of Person Authorized to Represent the Property Owner(s) Mailing Address of Authorized Person Phone Fax **Email Address** Preferred Method of Written Correspondence Fax Email Mail **Property Information** Land Serial Number(s) Wurdough Wildernews Lot Number Acreage Subdivision Name Culinary Water Provider Secondary Water Provider Waste Water Provider Frontage Detailed Description of Proposed Use/Structure **Property Owner Affidavit** , depose and say that I (we) am (are) the owner(s) of the property identified in this application I (We), and that the statements herein contained, the information provided in the attached plans and other exhibits are in all respects true and correct to the best of my (our) knowledge. (Property Owner) Subscribed and sworn to me this day of (Notary)

(We),, the object of the second state of the attached application.	owner(s) of the real property described in the attached a, to represent me (us) regarding the attache county considering this application and to act in all re	pplication, do authorized as m d application and to appear o espects as our agent in matter
Property Owner)	(Property Owner)	
Pated thisday of 20 perso igner(s) of the Representative Authorization Affidavit who duly ackno	onally appeared before me owledged to me that they executed the same.	th
		(Notary

Material - walls 2x4 (16 centers) / 1 111- sturny
- Floor 2x6 pressure treated (16" centers) 3/4 ply wood.
- Root 2x4 (16" centers) /2 fartical board / Tin 5:12 pitch





Customer Receipt

Receipt Number 13711

Receipt Date

05/23/16

Received From: Anderson

Time:

16:45

Clerk: thennett

			Olerk.	mennen
Description	Comment land use			Amount \$20.00
land use				
	Payment Type	Quantity	Ref	Amount
	CASH			
	AMT	TENDERED:	\$20.00	
	AMT	AMT APPLIED:		
	CHANGE:		\$0.00	