Date: 8/29/2016



### **Planning Commission**

Page 1 of 2

# **Land Use Permit**

Printed: 8/29/2016

Permit Number:

LUP510-2016

**Applicant** 

Name:

Klint Menke

Address:

PO Box 59

Owner

Name:

ROCKING HR RANCHES LLC

Address:

1044 N 115 ST #400

Phone:

801-389-2006

Phone:

Parcel

Parcel Number:

210210009

**Total Parcel Area:** 

NE 1/4

Address: 10109 E 325 S

15

HUNSTVILLE, UT 84317

Zoning: AV-3

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

\*\*See Diagram on Back Side for Setbacks

Section:

Township:

6N

Range: 2E

Subdivision:

Lot(s):

Proposed Structure:

<u>Acricultural</u>

Structure Area Used:

432

Is Structure > 1,000 Sq. Ft.?

\*If True, Need Certif. Statement

# of Dwelling Units:

# of Accessory Bldgs: 1

# Off-Street Parking Reqd:



### **Permit Checklist:**

Public by/Right of Use Road?

> 200 ft. from Paved Road?

No

< 4218 ft. above Sea Level?

No

Wetlands/Flood Zone? NA

Culvert Required?

NA

If Yes, Culvert Size:

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

Additional Frontage Regd.?

No

OR Special Exception?

Case #

Meet Zone Area & Frontage?

Hillside Review Reqd.?

Case #

Culinary Water District:

NA

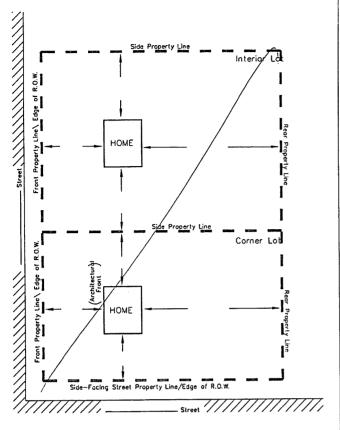
Waste Water System:

NA

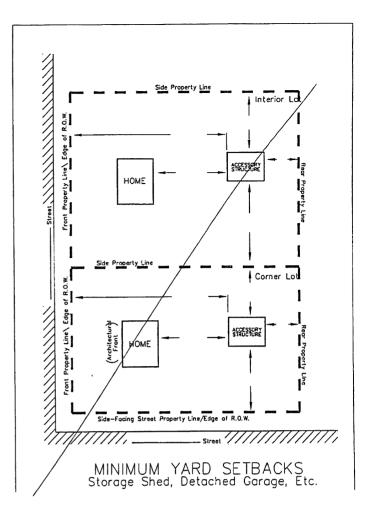
Comments: Ag Exempt structure for shelter of animals

Structure Setback Graphic:

Barns, Corrals, or Stables



MINIMUM YARD SETBACKS New Dwelling, Additaion, Etc.



# Street Interior Lo 0 HOME Frai Ş Corner Lot 象 Property Line\ E HOME Side-Facing Street Property Line/Edge MINIMUM YARD SETBACKS Barn, Corral, or Stable

Contractor/Owner Signature of Approval Date

#### NOTICE FOR APPLICANT (Please Read Before Signing)

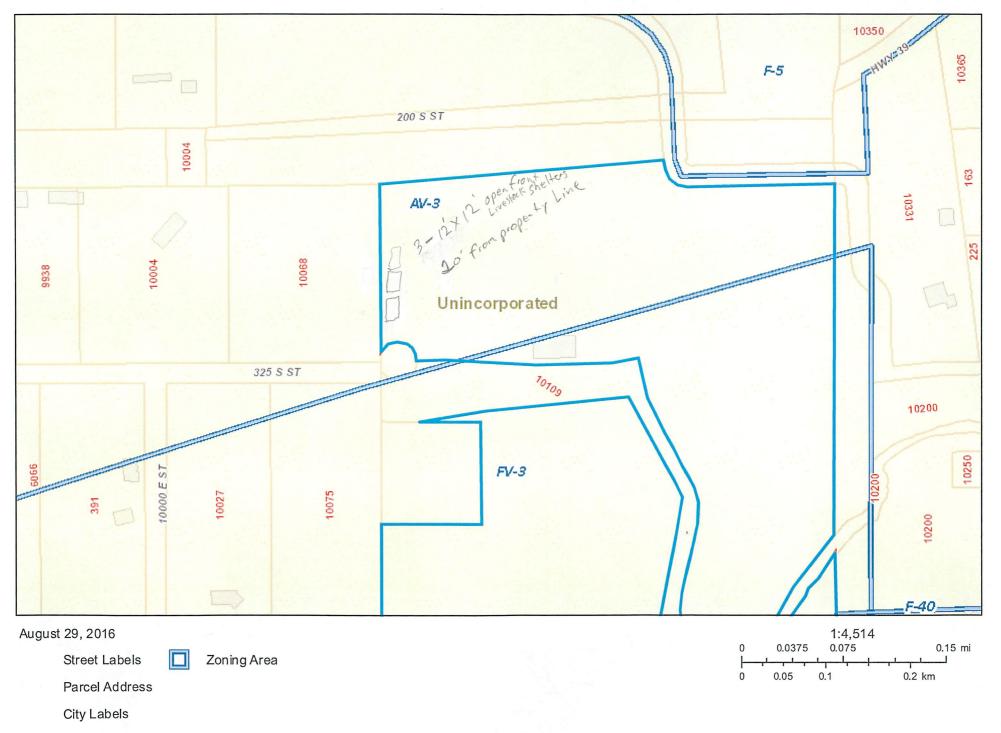
Proposals for the installation of an individual water supply and for a sanitary waste disposal system (septic tank) for any structure designed for human occupation must be approved by the Weber County Health Department prior to installation.

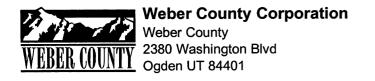
8-29-2016 Planning Dept. Signature of Approval

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.

8-29-2016

## menke





**Customer Receipt** 

Receipt Number 21932

**Receipt Date** 

08/29/16

Received From:

Rocking HR Ranches L

Time:

12:34

Clerk: ssillitoe

			OIGI K.	33111100
Description	ption Comment			Amount
LUP	LUP			\$50.00
	Payment Type	Quantity	Ref	Amount
	CHECK		3464	
	AMT	AMT TENDERED:		
	АМТ			
	CHA	NGE:	\$0.00	