All subdivisions submittals will be accepted by appointment only. (801) 399-8791. 2380 Washington Bivd. Suite 240, Ogden, UT 8440 Date Submitted / Completed fees (Diffice Use) Receipt Number (Office Use) File Number (Office Use) Subdivision and Property Information Subdivision and Property Information Number of Loss Number of Loss Subdivision Name Subdivision and Property Information Number of Loss Number of Loss Subdivision Name Subdivision Varies Number of Loss Number of Loss Subdivision Name Total Accesse 0.58 Number of Loss 1 Current Zoning Total Accesse 0.58 Number for Loss 1 Office Use Secondary Water Provider Wastewater Treatment PMVSD Property Owner Contact Information Number of Wastewater Treatment PMVSD Stad Accesse Pac Mailing Address of Authorized Dependence Secondary Water Provider Mail Stad Access of Authorized to Represent the Property Owner(1) Stad Subdivision Address Secondary Water Provider Mail Mailing Address of Authorized Dependence Fax Mail Mail Mail Authorized Representative Contact Information Secondary Water Provider	star and all islotts sur	omittals will be accept	pted by appointme	nt only. (801) 399-8791. 238	0 Washington	n Blvd. Suite 240, Ogden, UT 8	4401
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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 b my (our) knowledge. Property Øwner) (Property Owner) (Property Owner)	roperty Owner Affidav	it					
ubscribed and sworn to me this day of 20	and that the statements herein my (our) knowledge. Property Owner)	contained, the inform	nation provided in th	(Property Owner		the property identified in this ap Il respects true and correct to th	plica ie bes
See attached	ubscribed and sworn to me thi:	sday of	2	0			
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Authorized Representative Affidavit

I (We), <u>Thomas</u> Butgenbach (our) representative(s), <u>RICK EVERSON</u>, the owner(s) of the real property described in the attached application, do authorized as my my (our) behalf before any administrative or legislative body in the County considering this application and to act in all respects as our agent in matters (Property Owner) (Property Owner) Dated this ______day of ______, 20 _____, personally appeared before me ______ signer(s) of the Representative Authorization Affidavit who duly acknowledged to me that they executed the same. the See attached (Notary)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.
State of California County of <u>Los Angeles</u>
Subscribed and sworn to (or affirmed) before me on this 20 day of <u>February</u> , 20 <u>18</u> , by, Thomas Hubertus Buttgenbach proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.
AVALON DIANA WILLOWS Notary Public - California Los Angeles County Commission # 2222476 My Comm. Expires Nov 19, 2021
(Seal) Signature Augles (198

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.					
State of California County of <u>Los Angeles</u>					
Subscribed and sworn to (or affirmed) before me on this 20 day of <u>February</u> , 20 <u>18</u> , by					
	AVALON DIANA WILLOWS Notary Public – California Los Angeles County Commission # 2222476 My Comm. Expires Nov 19, 2021				
(Seal)	Signature Avalan (195				