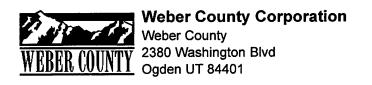
Property Owner Contact Information Name Lewis Howes Phone Fax Email Address Authorized Representative Contact Information Name of Person Authorized to Represent the Property Owner(s) Phone Fax Email Address Property Information Address Property Information Address Address Lot Number Bridges Culinary Water Provider W C Detailed Description of Proposed Use/Structure	AAsiliaa Addaaa	mail rized Person ten Correspondence
Phone Phone Phone Phone Phone Phone Phone Phone Pohne Presentative Contact Information Name of Person Authorized to Represent the Property Owner(s) Phone	Preferred Method of Write Fax	ten Correspondence Mail rized Person ten Correspondence Mail
Authorized Representative Contact Information Name of Person Authorized to Represent the Property Owner(s) Phone Fax Email Address Property Information Address 4875 E. Bailey Lane Lot Number Bridges. Culinary Water Provider W.C. Secondary Water Provider W.C.	Preferred Method of Write Fax	ten Correspondence Mail rized Person ten Correspondence Mail
Authorized Representative Contact Information Name of Person Authorized to Represent the Property Owner(s) Phone Fax Email Address Property Information Address 4875 E. Bailey Lane Lot Number Bridges. Culinary Water Provider W C. Secondary Water Provider W C.	Preferred Method of Write Fax	ten Correspondence Mail rized Person ten Correspondence Mail
Authorized Representative Contact Information Name of Person Authorized to Represent the Property Owner(s) Phone Fax Email Address Property Information Address 4875 E. Bailey Lane The UT84370 Subdivision Name Bridges. Culinary Water Provider W C. Secondary Water Provider W C.	Mailing Address of Autho Preferred Method of Writt Email Fax Land Serial Number(s) Current Zoning	mail rized Person ten Correspondence Mail
Phone Fax Phone Fax Property Information Address 4875 E. Bailey Lane The subdivision Name Bridges Subdivision Name Bridges Sullinary Water Provider W.C. Secondary Water Provider W.C.	Preferred Method of Writt Email Fax Land Serial Number(s) Current Zoning	ten Correspondence Mail
Phone Fax Email Address Property Information Address 4875 E. Bailey Lane Eden 4784370 Subdivision Name Bridges. B201 Culinary Water Provider W (C. Secondary Water Provider W (C. W)	Preferred Method of Writt Email Fax Land Serial Number(s) Current Zoning	ten Correspondence Mail
Property Information Address 4875 E. Bailey Lane Lot Number Bridges. Culinary Water Provider WC Email Address Lot Number B 2-01 Secondary Water Provider WC Lot Number B 2-01	Land Serial Number(s) Current Zoning	Mail Mail
Property Information Address 4875 E. Bailey Lane Eden ut 84310 Subdivision Name Bridges. Culinary Water Provider WC Secondary Water Provider WC	Land Serial Number(s) Current Zoning	Mail
Address 4875 E. Bailey Lave Eden 4784370 Subdivision Name Bridges. Culinary Water Provider WC Lot Number B 2-01 Secondary Water Provider WC	Current Zoning	Acreage
Subdivision Name Bridges B201 Culinary Water Provider WC Secondary Water Provider WC	Current Zoning	Acreage
Bridges. Eulinary Water Provider W (C Secondary Water Provider W (C	_	Acreage
Culinary Water Provider Secondary Water Provider Culinary Water Provider	Waste Water Provider	
Detailed Description of Proposed Use/Structure	w/c	Frontage
		tion and the second of the sec
Pergola anside of h	ouse. Approx	10'x 25'
Property Owner Affidavit		
I (We),	pose and say that I (we) am (are) the o I in the attached plans and other exhil	wner(s) of the property identified in this application bits are in all respects true and correct to the best of
(Property Owner)	(Property Owner)	
Subscribed and sworn to me thisday of	20	

Authorized Representative Affidavit	Abo a series de la constante d	faborani arangan dan dibadi a dia aba	had polication do sutto-in-ed
I (We),	ative body in the County co	f the real property described in the attac _, to represent me (us) regarding the at onsidering this application and to act ir	thed application, do authorized as my itached application and to appear on all respects as our agent in matters
(Property Owner)		(Property Owner)	
Dated thisday of, ; signer(s) of the Representative Authorization Affidav	20, personally appoint who duly acknowledged	eared before me to me that they executed the same.	, the
			(Notary)



Customer Receipt

Receipt Number 109927

Receipt Date

06/18/19

Received From: JOHN

Time:

12:42

			Clerk:	amartin
Description	Co		Amount	
ZONING FEES	LAND USE			\$60.00
	Payment Type	Quantity	Ref	Amount
	CASH		-	
	An	IT TENDERED:	\$60.00	
	An	IT APPLIED:	\$60.00	
	CH	IANGE:	\$0.00	