

Planning Commission Land Use Permit

Permit Number: LUP80-2014

Applicant

Name: North View Holdings LLC
Address: 1650 N MTN RD

Phone:

Owner

Name: M & M STORAGE LLC
Address: 1650 N MTN RD

Phone:

Parcel

Parcel Number: 190160121

Zoning: M-1

Total Parcel Area: 1.61

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

Address: 2797 North Highway 89
Pleasant View, Ut 84414

****See Diagram on Back Side for Setbacks**

Section:

Township:

Range:

Subdivision:

Lot(s):

Proposed Structure: New Commercial/Industrial Bldg.

Structure Area Used: 22851

Is Structure > 1,000 Sq. Ft.? True *If True, Need Certif. Statement

of Dwelling Units: 0

of Accessory Bldgs: 0

Off-Street Parking Req'd: 95



Permit Checklist:

Public by/Right of Use Road?

> 200 ft. from Paved Road? No

< 4218 ft. above Sea Level? No

Wetlands/Flood Zone? No

Culvert Required? No

If Yes, Culvert Size:

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

Additional Frontage Req'd.? Highway 89

OR Special Exception? Case #

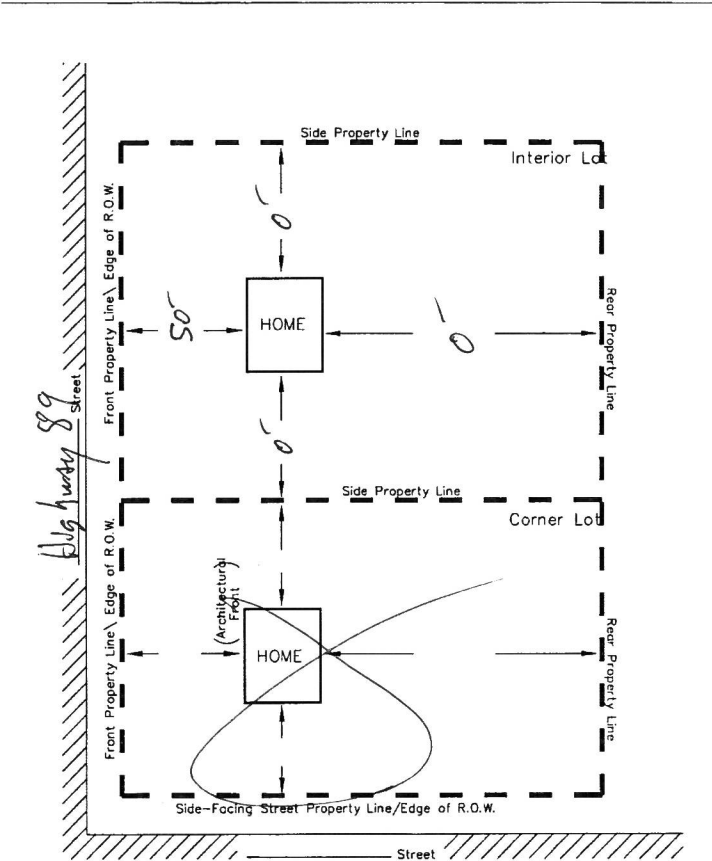
Meet Zone Area & Frontage? True

Hillside Review Req'd.? No Case #

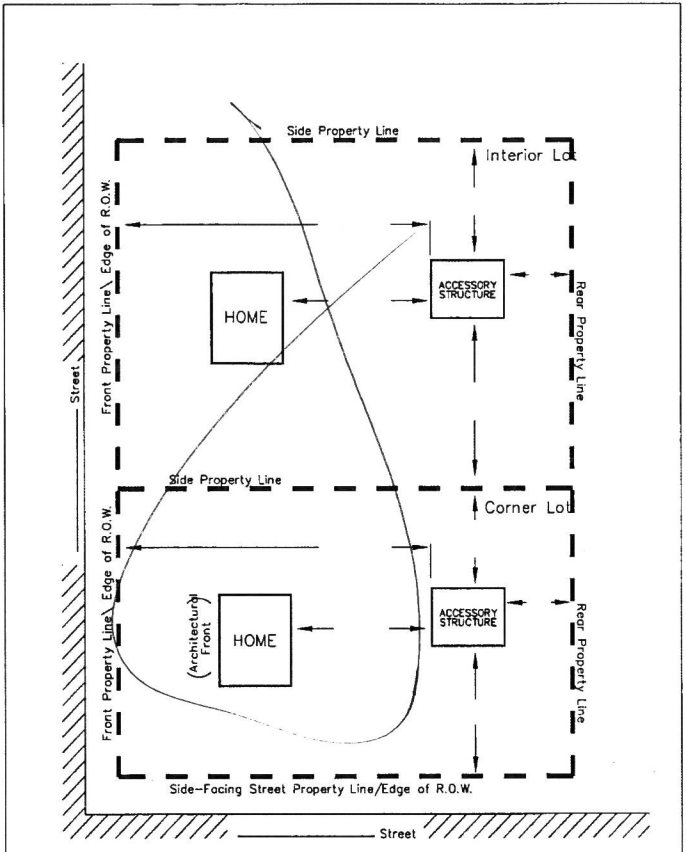
Culinary Water District: Bona Vista

Waste Water System: Central Weber

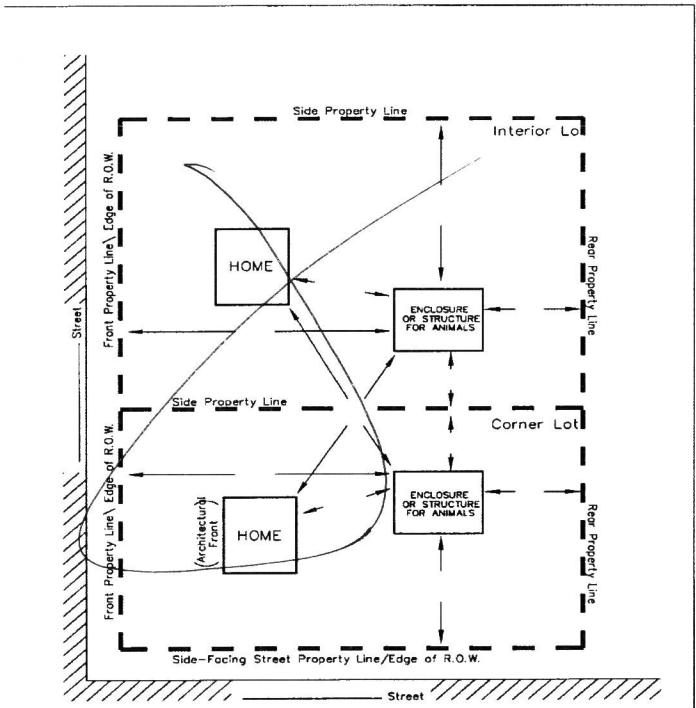
Comments: Setback minimums are shown on this permit for an office building. This permit is based upon a site plan and design approved July 16, 2013 DR # 2013-03. Conditions of approval of this site plan apply to with this permit. The property is under review for subdivision and must be recorded prior to final occupancy. Any items not finished must have an escrow approved for any occupancy to be issued prior to completion.



MINIMUM YARD SETBACKS
New Dwelling, Addition, Etc.



MINIMUM YARD SETBACKS
Storage Shed, Detached Garage, Etc.



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.

[Signature] _____
 Planning Dept. Signature of Approval Date 5/28/2014

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.

 Contractor/Owner Signature of Approval Date