

## **Land Use Permit**

**Weber County Planning Commission** 

2380 Washington Blvd. STE 240

Ogden, UT 84401

Phone: (801) 399-8791 FAX: (801) 399-8862

webercountyutah.gov/planning

Permit Number: LUP369-2021

Permit Type: Structure Permit Date: 11/03/2021

**Applicant** 

Randy Marriott

**Business:** 

Name:

Address: 5238 W 2150 N

Ogden, UT 84404

Phone:

801-731-7252

**Owner** 

Name: Same

**Business:** Address:

, UT

Phone:

**Parcel** 

Parcel: 100300002

Zoning: A-2

Area: 1084.55**Sq Ft**:

Address: 7500 W 700 N Ogden, UT 84404

Lot(s): N/A

Subdivision: N/A

T-R-S-QS: 6N-3W-4-NE

**Proposal** 

Proposed Structure: Equipment Storage Steel Building Footprint:

4800

Proposed Structure Height: 23

Max Structure Height in Zone: 25

# of Dwelling Units:

# of Accessory Bldgs:

# Off Street Parking Regd:

\*Is Structure > 1,000 Sq. Ft? N/A

\*If True Need Certif. Statement

**Permit Checklist** 

Access Type:

Front Lot Line

Greater than 4218 ft above sea level? No

Additional Setback Regd. ?

> 200 ft from paved Road?

Culinary Water District: N/A

No

N/A

Alternative Access File #

Wetlands/Flood Zone?

No

Meet Zone Area Frontage?

Yes

Hillside Review Regd?

N/A

Waste Water System:

N/A

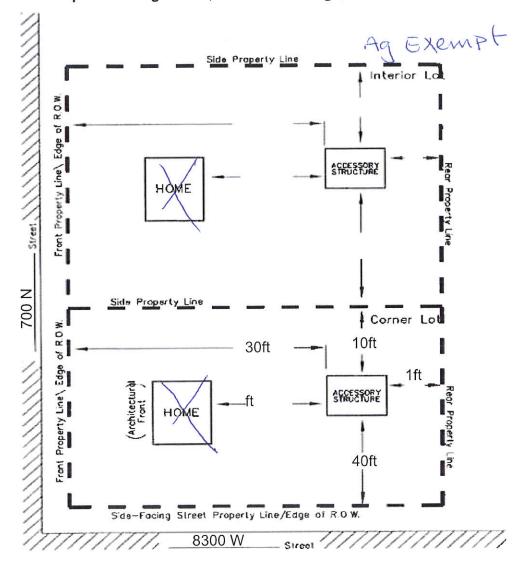
Comments

Flood Zone A runs through the property. Base flood elevation is less than 4218.



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Structure Setback Graphic: Storage Shed, Detached Garage, Etc.



MINIMUM YARD SETBACKS Storage Shed, Detached Garage, Etc.

## 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 occpation must be approved by Weber County Health Department prior to installation.

Marta Borchert	11/03/2021
Planning Dept. Signature of Approval	Date
I hereby certify that I have read and e and know the same to be true and correct and ordinances governing this land use w specified herein or not. I make this statem	t. All provisions of laws rill be complied with whether
Contractor/Owner Signature of Approval	Date