Date: 6/19/2015



### **Planning Commission**

Page 1 of 2

# **Land Use Permit**

Printed: 6/19/2015

Permit Number:

LUP147-2015

**Applicant** 

Name:

Kelly Gerber

Address:

863 N 2325 W

Owner

Name:

Kelly Gerber

Address:

863 N 2325 W

Phone:

Phone:

**Parcel** 

Parcel Number:

230550011

Total Parcel Area: 1.0

Address: 6316 ELK CIR N

Zoning: F-10

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

\*\*See Diagram on Back Side for Setbacks

Section:

Township:

Range:

Subdivision:

Sunrdige Subdivision 3

Lot(s): 72

Proposed Structure:

RV Pad (Sunridge)

Structure Area Used:

Is Structure > 1,000 Sq. Ft.?

False

\*If True, Need Certif. Statement

# of Dwelling Units:

# of Accessory Bldgs: 1

# Off-Street Parking Regd: 2



#### **Permit Checklist:**

Public by/Right of Use Road?

> 200 ft. from Paved Road? < 4218 ft. above Sea Level?

No

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 Regd.?

No

OR Special Exception?

Case #

Meet Zone Area & Frontage?

True

Hillside Review Regd.?

No

Case #

Culinary Water District:

Sunridge

Waste Water System:

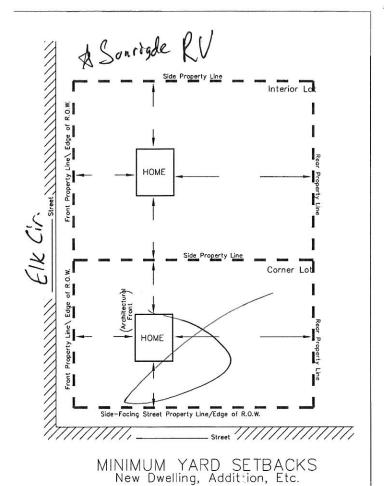
Individual

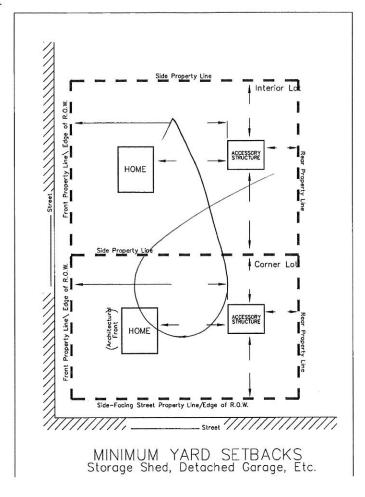
Comments:

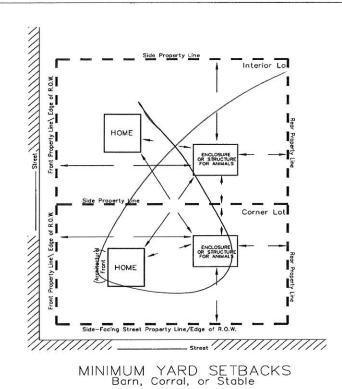
This permit is for one RV pad and one shed (100 square feet) in Sunridge. A previous permit had been issued for this lot, however it now has a new owner, so this permit is an update.

Structure Setback Graphic:

**RV** Pad







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

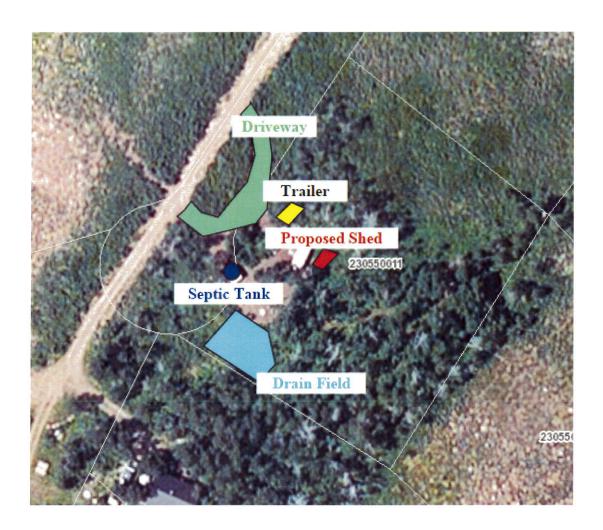
Proposals for the installation of an individual water supply and for a sanitary waste disposal system (septic tank) for any structure designed for human occupation must be approved by the Weber County Health Department prior to installation.

Planning Dayot. Signature of Approval Date

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/Swner Signature of Approval Date

1



READY

### WEBER-MORGAN HEALTH DEPARTMENT WASTEWATER PROGRAM OFFICE 2570 Grant Ave., Ogden, Utah 84401 Phone 399-8381 Fax 399-8323

## APPLICATION FOR AN ON-SITE WASTEWATER DISPOSAL PERMIT

Fee P	Paid_ 260	Fee Owed	Log# <u>1736</u> 7	PermW 99-758
	4	N Elk Cir	Land Serial#	23 055 0011
Subdiv	ision Juni	idge	Lot No.72	No. of Bedrooms 2
Water S	Supply Scyl	ridge	Approved	1
Applica	and Dhap	e Prevedel	Phon	ne 131.5672
Mailing	g Address 30	80 0 3300	S.	ł
City_	West Ho	wen	State Ltt	Zip Code \$440
*****		**************************************		
In consindividu	ual wastewater c	Weber-Morgan Health Dep lisposal system at the const	artment (the Departmer cruction site address lis	nt) allowing me to install an ted above, I agree to do the
2.	by the Departme I hereby assume	ent; all responsibility if the syste makes no representation as to	m should malfunction a	nance to the plans approved nd hereby acknowledge that e reliability of the individual
3. 1 8	If the system ma alterations appro	Ifunctions, I agree to imme ved by the Department or rep nt and shall bear all costs o	lace the system with a w	rtment and make repairs of vastewater system approved oval of the old system and
4. Ι ι	I hereby authorize	e the Department through a cy during regular 8 a.m. to 5		
UNDE	RSTAND AND	AGREE TO FULLY COM	PLY TO THE ABOVE	2-LISTED CONDITIONS:
Applicar	it Ways	RPull	D	ate Aug. 7 2002

# WEBER-MORGAN HEALTH DEPARTMENT

#### FINAL APPROVAL OF INDIVIDUAL WASTEWATER SYSTEM

2570 Grant Avenue Ogden, Utah 84401 OFFICE (801) 399-8381 FAX (801) 399-8323

August 27, 2003

WAYNE PREVEDEL 3680 W 3300 S WEST HAVEN, UT 84401-

Permit No. W99758 ABSORPTION FIELD

This is to certify that on August 22, 2003 the Weber-Morgan Health Department made a final inspection of the individual wastewater disposal system installed at the construction site address of: 6316 N ELK CIR in WEBER COUNTY, UTAH.

At the time of the final inspection, the wastewater system was found to be in compliance with the requirements of the Weber-Morgan Health Department. Approval to place the above-referenced wastewater system into service is hereby granted to WAYNE PREVEDEL.

This individual wastewater disposal system will require periodic maintenance to keep the system working properly. In addition, care must be taken not to disturb or damage the ABSORPTION FIELD. The attached document will provide you with information on the proper care and maintenance of this wastewater disposal system.

If you have any questions or need further assistance please contact this office at (801) 399-8381.

Representative, Weber-Morgan Health Department

Date Issued 2.6.07 By Initial Inspection By	,
Water Table Percolation Rate 30 MPI Final Inspection 8-22-03 By BC	
Septic Tank Size 1000 Pumping Chamber Size 100 Total Absorption Area 500 Sc	ą. Ft.
Type of System       Fee         Conventional (includes absorption fields and absorption beds)       \$175.00         Seepage Trench       \$250.00         At-Grade       \$250.00         Mound       \$350.00         Renewal       \$75.00         Alteration       \$-0.00         On-site Training Center       \$-25.00	
H.B. 14, passed by the legislature in the 2001 session, created a \$25.00 fee for all new undergr wastewater disposal systems, beginning July 1, 2001. These fees will go into a new State restricted according be used for the training, testing, and certification programs at the on-site training center.	ound int to
Instructions  Sized for maximum water usage of	
***************************************	***
INSTALLER: BUTCH BARTON  N  1000  S  10	ार इ.स. इ.स. इ.स. इ.स.
TYPE B CHAMBER  36"	