**Weber County Building Inspections Permit Application** 

Date Submitted Date Issu			ued	Receipt Number		mber	Square ft of building Valuation		Valuation	<b>Permit Number</b>
Proposed use of structure							Rough Basement Finished Basement			16F
Single Family Dwelling							Carport sq ft Garage sq ft			
Building address Parcel Number							Curport sq it	Carage 34 re		Building Fees
8343 E Summit Pass					23-130-0002		Type of Bldg.	Occ. Group		
Lot Subdivision name							- //			Plan Check Fees
37 Powder Mountain							No. of Bldgs. No. stories		tories	
Property location Total property area Total bld. area						Total bld. area				Electrical Fees
Summit 2.1 acreage						Total bla. area	No. of dwellings			
Owner of property					Phone number		-			Plumbing Fees
Mike and Nayri Geary					310-922-1821		No. of bedrooms			
Mailing Address City -					7in		TO THE PROPERTY OF THE PROPERT			Mechanical Fees
8343 E Summit Pass Sumr							Max occ. load	Fire S	Fire Sprinkler	
Architect or Engineer					Phone number 801-485-0708					Subtotal
Upwall Architect							Type of improve	l ment		
General Contractor Phone number						ne number	Build			State Fee
The state of the s					801-497-1746		Number of covered parking			
						Business Lic				Storm Drain Impact fee
778 E 5750 S 319161-550							No. of off street parking uncovered			
Electrical Contractor Phone number						ne number				Wastewater Impact fee
Adventure Electric 801-458-7786										
Contractors address State License #					nse #	Business Lic	Land use fee	Lan	nd use permit	Roadways Impact fee
1541 Oakridge Dr, Ogden 8023441-5					THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRESS OF THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRESS OF THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRESS OF THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRESS OF THE PERSON					
Plumbing Contractor					Phone number 801- 644-8400		Trails Impact fee			Other Fees
Contractors address State Lice				nse #   Business Lic		Other Fees			Total Fee	
2521 Woodland Dr 6176473-										
Mechanical Contractor Pho					Phon	ie number	September 1			
Ben Lomond					801-920-3331		This application does not become a permit until signed below.			
Contractors address State License # Business Lic						Business Lic	Plan Chk. OK by			
2300 N Highway 89 266085				66085-55	501 11973		Signature of			Date
SUB-CHECK Zone Approved By							Approval  This permit becomes null and void if work or construction authorized is not com-			
Disapproved Sub-Ck. By Sub-Ck. By							menced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have			
Plot Plan Minimum Setbacks in Feet ( )						)	read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with			
SEE L. U. P.							whether specified herein or not the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction and that I make this statement			
House or							under penalty of pe		mance of constru	uction and that I make this statement
Indicate Street If Corner Lot  House & Garage if Attached						if \				
Indicate ( )							* Signature of Contractor or Authorized Agent Date			
North NOTE: 24 hours notice is required for all inspections.							*			
							Signature of Owner (If owner) (Date)			