

# Weber County Design Review Application

Application submittals will be accepted by appointment only. (801) 399-8791. 2380 Washington Blvd. Suite 240, Ogden, UT 84401

Date Submitted / Completed 4/2/12	Fees (Office Use) \$ 225.00	Receipt Number (Office Use) # 687	File Number (Office Use) DR2012-04
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## Property Owner Contact Information

Name of Property Owner(s) Paul Judd		Mailing Address of Property Owner(s) 2616 N State St Preston ID 83263	
Phone 208-240-8296	Fax		
Email Address (required) pauljudd@mstar.net		Preferred Method of Written Correspondence <input checked="" type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Mail	

## Authorized Representative Contact Information

Name of Person Authorized to Represent the Property Owner(s) Nathan Gold		Mailing Address of Authorized Person 2956 W 5775 S Roy, UT 84067	
Phone 801-824-1453	Fax		
Email Address nategold34@gmail.com		Preferred Method of Written Correspondence <input checked="" type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Mail	

## Property Information

Project Name Garden at Eden	Current Zoning CV-2	Total Acreage 2.5 Ac ±
Approximate Address 5460 East 2200 North Eden, Utah 84310 Parking area	Land Serial Number(s) 22- <del>047</del> -0002	

Proposed Use  
Short term Vendor / Sale of bedding Plants and Produce

Project Narrative

The Garden at Eden will be a retail location specializing in fresh produce and bedding plants. We will open June 6th and we will stay open until mid September. We will have 2 tents that we will keep our product and plants in. We will have a temporary fence around our tents. Our hours will be 10 am to 6 pm on weekdays and 9 am to 6 pm on Saturday. The tents will be 8' x 20' long each. We will have a sign reading Utah fresh produce at our secondary entrance. We will have 2-3 employees. There will be at least one employee there during business hours. Our produce will consist of peaches, corn, tomatoes, squash, melon, berries, honey dew, jams, and other fruits/veggies. Our plants will consist of hanging baskets, planters, and flats.

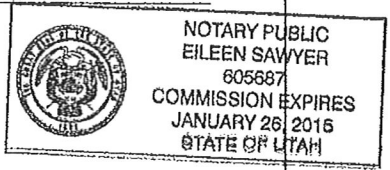
**Property Owner Affidavit**

I (We), Paul L Judd, depose and say that I (we) am (are) the owner(s) of the property identified in this application and that the statements herein contained, the information provided in the attached plans and other exhibits are in all respects true and correct to the best of my (our) knowledge.

Paul L Judd  
(Property Owner)

(Property Owner)

Subscribed and sworn to me this 30 day of March, 2012



Eileen Sawyer  
(Notary)

**Authorized Representative Affidavit**

I (We), Paul L Judd, the owner(s) of the real property described in the attached application, do authorized as my (our) representative(s), Jeff Cole, to represent me (us) regarding the attached application and to appear on my (our) behalf before any administrative or legislative body in the County considering this application and to act in all respects as our agent in matters pertaining to the attached application.

Paul L Judd  
(Property Owner)

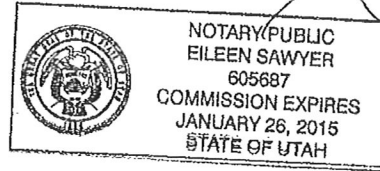
(Property Owner)

Dated this 30 day of Mar, 2012, personally appeared before me Paul L Judd, the signer(s) of the Representative Authorization Affidavit who duly acknowledged to me that they executed the same.

STATE OF UTAH  
COUNTY OF: Weber  
ON THE 30 DAY OF Mar, 2012  
PERSONALLY APPEARED BEFORE ME  
Paul Judd SIGNER(S) OF THE ABOVE  
INSTRUMENT, WHO DULY ACKNOWLEDGED TO ME THAT  
HE/SHE/THEY EXECUTED THE SAME

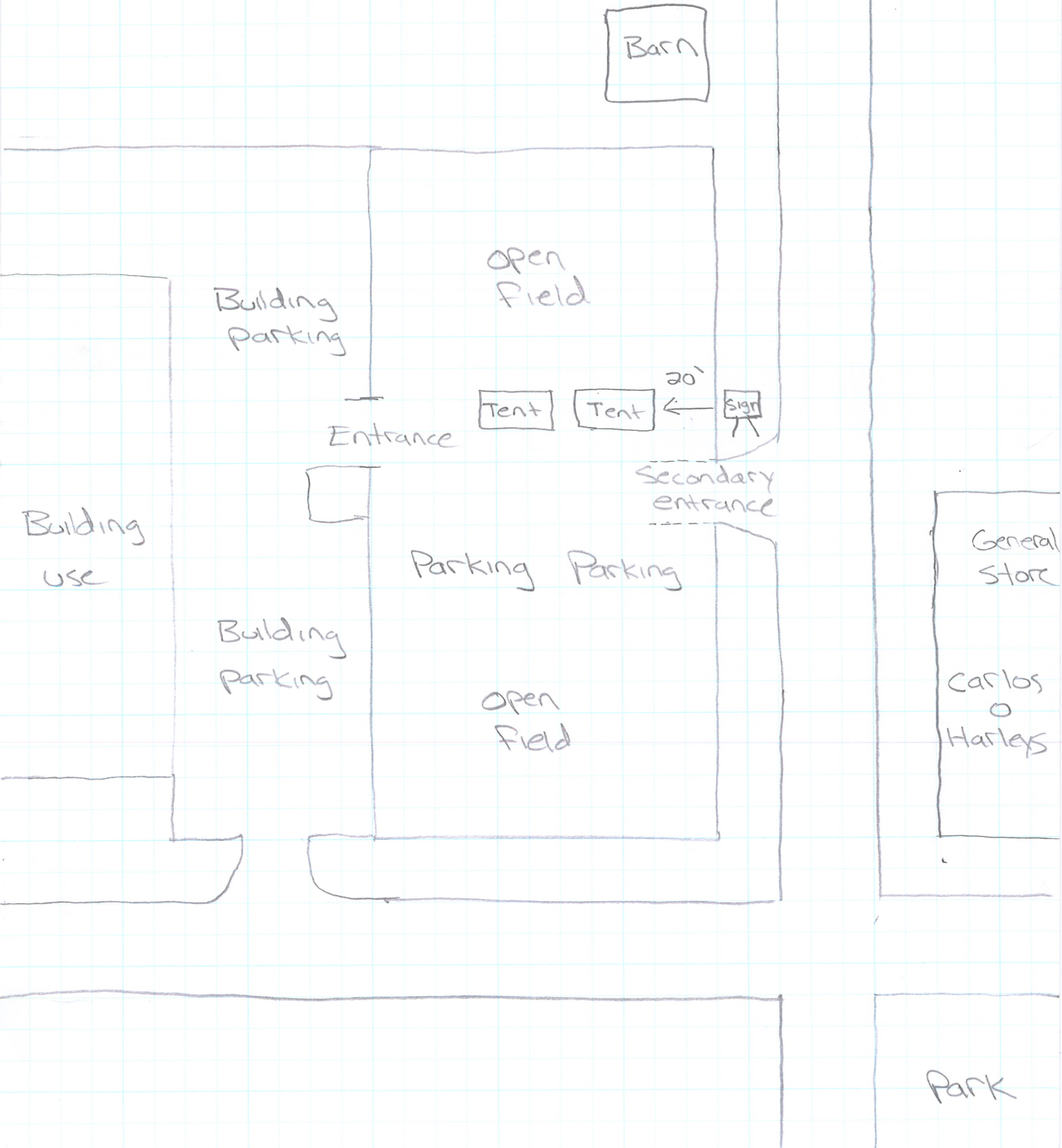
Eileen Sawyer  
NOTARY PUBLIC

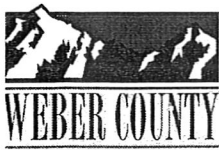
Eileen Sawyer  
(Notary)



# Site Plan

Garden at Eden  
5460 E 2200 N  
Eden UT 84310





WEBER COUNTY CMS RECEIPTING SYSTEM  
OFFICIAL RECEIPT

\*\*\* Save this receipt for your records \*\*\*

Date: 02-APR-2012

Receipt Nbr: 687

ID# 3032

Employee / Department: ANGELA MARTIN - 4181 - PLANNING  
Monies Received From: JEFF GOLD & SONS LANDSCAPING  
Template: PUBLIC WORKS  
Description: DESIGN REVIEW APPLICATION

The following amount of money has been received and allocated to the various accounts listed below:

Total Currency	\$	_____	.00
Total Coin	\$	_____	.00
Total Debit/Credit Card	\$	_____	.00
Pre-deposit	\$	_____	.00
Total Checks	\$	_____	225.00
Grand Total	\$	=====	225.00

Account Number	Account Name	Comments	Total
2012-01-4241-3220-0000-000	PLAN REVIEW FEE		225.00
TOTAL \$			225.00

Check Amounts

225.00

Total Checks: 1

Total Check Amounts: \$ 225.00

\*\*\* SAVE THIS RECEIPT FOR YOUR RECORDS \*\*\*

**FOOD ESTABLISHMENT INSPECTION FORM**

Based on an inspection this day, the items recorded below identify the violations in operations or facilities which must be corrected by the next routine inspection or such shorter period of time as may be specified below or in writing by the agency. Failure to comply with any time limit for CORRECTIONS specified in this notice may result in additional regulatory action.

Name of Establishment <i>Garden of Eden</i>	Location/Address <i>5460 E. 2200 N</i>	City/Town <i>Eden</i>	Zip Code <i>84310</i>
Date <i>4-2-12</i>	Establishment Type & Category <i>304</i>	Customer Number	EHS <i>612</i>

Purpose of Inspection:  Routine  Follow-Up  Pre-operational  Complaint  Temporary  HACCP  Illness Investigation  Other

**HIGH RISK FACTORS AND INTERVENTIONS HIGH RISK FACTORS AND INTERVENTIONS**

Critical items are highlighted in gray. Critical items are factors which lead to food-borne illness or injury. Violations or critical items must receive immediate action (within 72 hours) or as stated. Inspection items are in compliance unless otherwise marked. Circled item indicates compliance status: IN (in compliance); OUT (not in compliance); N/O (not observed); N/A (not applicable). Check mark indicates: CDI (corrected during inspection); \* (previous violation).

<p><b>1. DEMONSTRATIONS OF KNOWLEDGE</b> <span style="float:right">CDI</span></p> <p>A. <input checked="" type="radio"/> IN <input type="radio"/> OUT PIC Certified by accredited program; knowledge</p> <p>B. <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A All food workers have current food handlers permits</p> <p><b>2. EMPLOYEE HEALTH</b> <span style="float:right">CDI</span></p> <p>A. <input checked="" type="radio"/> IN <input type="radio"/> OUT Personnel with infections excluded/restricted</p> <p>B. <input checked="" type="radio"/> IN <input type="radio"/> OUT Company has food-borne illness policy or workers are aware</p> <p><b>3. GOOD HYGIENIC PRACTICES</b> <span style="float:right">CDI</span></p> <p>A. <input checked="" type="radio"/> IN <input type="radio"/> OUT N/O Smoking/eating/drinking not allowed</p> <p>B. <input checked="" type="radio"/> IN <input type="radio"/> OUT N/O Clean hands/properly washed/finger nails</p> <p>C. <input checked="" type="radio"/> IN <input type="radio"/> OUT N/O <input checked="" type="radio"/> N/A Avoid bare hand contact with RTE food/minimize food handling</p> <p>D. <input checked="" type="radio"/> IN <input type="radio"/> OUT Adequate hand washing facilities/soap/drying/signage</p> <p>E. <input checked="" type="radio"/> IN <input type="radio"/> OUT Clean clothes/proper hair restraint</p> <p><b>4. APPROVED SOURCES/WHOLESOME/NOT ADULTERATED</b> <span style="float:right">CDI</span></p> <p>A. <input checked="" type="radio"/> IN <input type="radio"/> OUT Food obtained from approved source</p> <p>B. <input checked="" type="radio"/> IN <input type="radio"/> OUT Food/container in good condition, unadulterated, properly stored</p> <p>C. <input checked="" type="radio"/> IN <input type="radio"/> OUT N/O <input checked="" type="radio"/> N/A Records available; shell stock tags, parasite destruction</p> <p>D. <input checked="" type="radio"/> IN <input type="radio"/> OUT Original container, properly labeled</p> <p><b>5. FOOD PROTECTION FROM CONTAMINATION</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT N/A Food contact surfaces clean/sanitized</p> <p>B. <input type="radio"/> IN <input type="radio"/> OUT N/A Non food contact surfaces clean</p> <p>C. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Raw/RTE foods properly stored &amp; segregated</p> <p>D. <input type="radio"/> IN <input type="radio"/> OUT Food contact surfaces properly constructed/maintained</p> <p>E. <input type="radio"/> IN <input type="radio"/> OUT Non food contact surfaces properly constructed/maintained</p> <p>F. <input type="radio"/> IN <input type="radio"/> OUT Food protection: display/storage/transportation/preparation</p> <p>G. <input type="radio"/> IN <input type="radio"/> OUT Proper disposition of returned/contaminated food</p> <p>H. <input type="radio"/> IN <input type="radio"/> OUT N/A In-use dispensing utensils properly stored/used</p> <p>I. <input type="radio"/> IN <input type="radio"/> OUT N/A Wiping cloths: clean, stored in sanitizer, use restricted</p> <p><b>6. INSECT/RODENT/ANIMAL CONTROL</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT Evidence of vermin, outer openings protected/sealed</p>	<p><b>7. POTENTIALLY HAZARDOUS FOOD TIME/TEMPERATURE</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT N/O <input checked="" type="radio"/> N/A Proper cooking time and temperature</p> <p>B. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Proper hot holding (135 degrees F/57 degrees C or higher)</p> <p>C. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Proper cooling-reheating process/procedure</p> <p>D. <input type="radio"/> IN <input type="radio"/> OUT N/A Adequate facilities to maintain product temperature</p> <p>E. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Proper cold holding (41 degrees F/5 degrees C or lower)</p> <p>F. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Thermometers available and accurate</p> <p>G. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Proper process/procedure for thawing frozen food</p> <p>H. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Time as a public health control, date marking</p> <p><b>8. CONSUMER ADVISORY</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A Consumer advisory for raw or undercooked food is provided</p> <p><b>9. CONFORMANCE WITH APPROVED/REQUIRED PROCEDURES</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT N/O <input checked="" type="radio"/> N/A Conformance with variance/HACCP Plan</p> <p><b>10. CHEMICAL</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT <input checked="" type="radio"/> N/A Approval additives used</p> <p>B. <input checked="" type="radio"/> IN <input type="radio"/> OUT Toxic substances properly identified, stored, used</p> <p><b>11. DISH/WARE WASHING/SANITIZING</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT N/O <input checked="" type="radio"/> N/A Sanitization of dishes/utensils, temperature/concentration, time</p> <p>B. <input type="radio"/> IN <input type="radio"/> OUT N/O <input checked="" type="radio"/> N/A Test kits available/accurate thermometers</p> <p>C. <input type="radio"/> IN <input type="radio"/> OUT N/O <input checked="" type="radio"/> N/A Dishwashing facilities properly constructed/maintained</p> <p>D. <input type="radio"/> IN <input type="radio"/> OUT N/O <input checked="" type="radio"/> N/A Proper ware washing procedures followed</p> <p><b>12. WATER (HOT/COLD), PLUMBING, SEWAGE DISPOSAL, RESTROOMS</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT Facility water supply from approved source</p> <p>B. <input type="radio"/> IN <input type="radio"/> OUT Hot/cold water and under pressure</p> <p>C. <input type="radio"/> IN <input type="radio"/> OUT Sewage disposal facilities and process are provided/used</p> <p>D. <input type="radio"/> IN <input type="radio"/> OUT Plumbing installed/maintained according to code</p> <p>E. <input type="radio"/> IN <input type="radio"/> OUT No cross connections, back siphonage/backflow prevention</p> <p>F. <input type="radio"/> IN <input type="radio"/> OUT Number and location/design of restrooms</p> <p>G. <input type="radio"/> IN <input type="radio"/> OUT Restrooms clean/repair, proper waste receptacles, handwash</p>
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**LOWER RISK FACTORS/GENERAL OPERATING PRACTICES**

<p><b>13. USE AND STORAGE OF UTENSILS</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Proper storage &amp; handling of clean equipment &amp; utensils</p> <p>B. <input type="radio"/> IN <input type="radio"/> OUT N/O N/A Single service articles/utensils-are properly stored &amp; used</p> <p><b>14. GARBAGE AND REFUSE DISPOSAL</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT Containers: clean, adequate number, vermin proof, dumped frequently, covered</p> <p>B. <input type="radio"/> IN <input type="radio"/> OUT N/A Outside storage: clean, proper construction, covered</p> <p><b>15. FLOORS/WALLS/CEILINGS/PREMISES</b> <span style="float:right">CDI</span></p> <p>A. <input type="radio"/> IN <input type="radio"/> OUT Floors properly constructed, drained, clean, covered, good repair</p> <p>B. <input type="radio"/> IN <input type="radio"/> OUT Walls/ceilings properly constructed, good repair, clean, equipment</p> <p>C. <input type="radio"/> IN <input type="radio"/> OUT Premises maintained free of litter, unnecessary storage, cleaning equipment storage, authorized personnel</p>	<p><b>16. OTHER OPERATIONS</b> <span style="float:right">CDI</span></p> <p>A. <input checked="" type="radio"/> IN <input type="radio"/> OUT Adequate lighting provided, fixtures shielded</p> <p>B. <input checked="" type="radio"/> IN <input type="radio"/> OUT Rooms and equipment adequately ventilated</p> <p>C. <input checked="" type="radio"/> IN <input type="radio"/> OUT Separation of living/sleeping quarters and laundry</p> <p>D. <input checked="" type="radio"/> IN <input type="radio"/> OUT Employee lockers provided, room clean and properly located</p> <p>E. <input checked="" type="radio"/> IN <input type="radio"/> OUT Clean and/or soiled linen properly stored</p> <p><b>TEMPERATURE OBSERVATIONS</b></p> <table style="width:100%;"> <tr> <td>Product Temperature:</td> <td>Product Location:</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td>Product Temperature:</td> <td>Product Location:</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td>Product Temperature:</td> <td>Product Location:</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	Product Temperature:	Product Location:			Product Temperature:	Product Location:			Product Temperature:	Product Location:		
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**OBSERVATIONS AND CORRECTIVE ACTIONS**

Reference Number/Letter	Notes/Observations/Corrective Actions

RR - Meat department review for facility already on current inspection roster	HRI - Meat Review, facility not on current inspection roster. Facility type:
Person in Charge (Print) <i>Nate Gold</i>	Follow-up Required? <input type="radio"/> Yes <input checked="" type="radio"/> No If yes, Follow-up Date:
Person in Charge Signature: <i>[Signature]</i>	Date: Page: <b>Regulatory Action:</b> Hold Order Number:
Inspector Signature: <i>[Signature]</i>	Date: <i>4-2-12</i> of Hold Order lbs: Voluntary Destruct lbs:
	Hold Order Release Number: Hold Order Release lbs:



Weber County

Weber County Planning Division  
www.co.weber.ut.us/planning  
2380 Washington Blvd., Suite 240  
Ogden, Utah 84401-1473  
Voice: (801) 399-8791  
Fax: (801) 399-8862

## Design Review (Commercial, Manufacturing, and other Main Uses)

Design review allows the Planning Division an opportunity to review specified proposed developments, with the goals established by the General Plan and standards listed in county ordinances, which implement the goals of the General Plan.

A pre-application meeting is required prior to application submittal; please call (801) 399-8791 to make an appointment. Date of pre-application review meeting: 3-26-12 Time: 3:00

- Staff member assigned to process application: Scott

APPLICATION DEADLINE: Thirty (30) days prior to the applicable Planning Commission meeting

The Western Weber County Township Planning Commission holds their meetings on the 2<sup>nd</sup> Tuesday of the month.

The Ogden Valley Township Planning Commission holds their meetings on the 4<sup>th</sup> Tuesday of the month.

### First Determination

- Is this a small building with a total footprint of less than 10,000 sq ft and a project area of less than one acre

If **Yes**, the application can be approved administratively without Planning Commission review.

If **No**, the application will be reviewed by the Planning Commission.

### Application Submittal Checklist

The Planning Division will only accept complete applications with supporting documents as outlined below. Submitting an application does not guarantee that this application will be placed on the next Planning Commission agenda.

The following is required as part of the application form submittal:

- Complete Application Form
- A non-refundable fee made payable to Weber County (see *Fee Schedule*)
- Obtain signature of the owner(s) on the application and any authorized representatives
- All documents submitted in the application shall be accompanied by a PDF file of the respective document. All plans (including but not limited to site plans, architectural elevations/renderings, etc), and subsequent submittals and revisions, shall be accompanied by a full scale set of PDF files of the respective plans.
- Culinary water and waste water letter



# Weber County

Weber County Planning Division  
 www.co.weber.ut.us/planning  
 2380 Washington Blvd., Suite 240  
 Ogden, Utah 84401-1473  
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- All applications for occupancy permits or building permits for all multi-family (over 8) dwellings, recreation resort uses, public and quasi-public uses, business, commercial and manufacturing buildings, structures and uses and their accessory buildings, shall be accompanied by architectural elevations and site development plans to scale, which shall show building locations, major exterior elevations, exterior building materials and color schemes, landscaping, prominent existing trees, ground treatment, fences, off-street parking, vehicle and pedestrian circulation, adjacent buildings, streets and property lines, and existing grades and proposed new grades. All plans shall be reviewed and approved by the Planning Commission with the exception that small buildings with a total footprint of less than 10,000 sq ft and a project area of less than one acre shall be reviewed and approved by the Planning Director after meeting the requirements of all applicable ordinances. All of the above required architectural and site development plans shall be reviewed and approved prior to the issuing of any land use, occupancy or building permit.

Other zoning ordinance chapter requirements may apply as determined in the pre application meeting

### Fee Schedule

Property Zoning CV-2 Fee Required \$225

- Design Review \$225
- Design Review Over 5000 sq. ft. \$225 plus \$15 per 1000 sq. ft.
- Administratively approved over 1000 sq. ft. \$100 plus \$15 per 1000 sq. ft.
- Administratively approved less than 1000 sq. ft. \$100

### Purpose and Intent of Design Review

The purpose and intent of design review by the Planning Commission is to secure the general purposes of this ordinance and the general plan and to insure that the general design, layout and appearance of buildings and structures and the development of property shall in no case be such as would impair the orderly and harmonious development of the neighborhood or impair investment in and occupation of the neighborhood.

### Approval Criteria

The Planning Commission and/or the Planning Director shall consider the following matters under The Weber County Zoning Ordinance Chapter 36-4 and others when applicable, in their review of applications and where the plan is found deficient, the plan design shall be amended or conditions imposed to mitigate such deficiencies when considering:

1. Considerations relating to traffic safety and traffic congestion
2. Considerations relating to outdoor advertising
3. Considerations relating to landscaping
4. Considerations relating to buildings and site layout
5. Considerations relating to utility easements, drainage, and other engineering questions



## Weber County

Weber County Planning Division  
www.co.weber.ut.us/planning  
2380 Washington Blvd., Suite 240  
Ogden, Utah 84401-1473  
Voice: (801) 399-8791  
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6. Considerations relating to prior development concept plan approval associated with any Rezoning Agreement, Planned Commercial or Manufacturing Rezoning or Planned Residential Unit Development Approval.

### Appeal Process

Appeals of Staff administrative approvals are made to the Planning Commission within 15 days of the decision.

Appeals of the Planning Commission decision are made to the County Commission within 15 days of the decision.

### For Your Information

If construction of any development for which design approval has been granted has not been commenced within eighteen months from date of Design Review approval, the approval shall be deemed automatically revoked. Upon application, the Planning Commission may grant an extension of time.

This application can be filled out online at the following Planning Division web site: [www.co.weber.ut.us/planning](http://www.co.weber.ut.us/planning)  
Copies of the applicable Weber County Zoning Ordinances and other helpful information are also available at this web site.