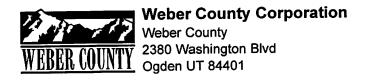
W	eber County Land	Use Permit Ap	plication		
A	pplication submittals are recommen (801) 399-8791. 2380 Washingto				
Date Submitted / Completed	Fees (Office Use)		Receipt Number (Office Use)		
Property Owner Contact Info	rmation				
Name		Mailing Address			
Phone Fax		7795 W 900 Socrep			
Phone Fax 801-791-4867		Ogden uton 84404			
Email Address		Preferred Method of Written Correspondence Email Fax Mail			
Authorized Representative C	ontact Information				
Name of Person Authorized to Represen	nt the Property Owner(s)	Mailing Address of Authorized Person			
Jamic W Vigil		7795 W 900 Sours			
		Ogden what 84404			
801-791-4867 Email Address					
JWV1911086	gmail.com.	Preferred Method of Writt Email Fax			
Property Information					
Address		Land Serial Number(s)			
7795 W 90	0 Sound	10 170	3-0003		
7795 W 90 Ogden Wan 8	21404	10-129	1-0003	1	
Subdivision Name  Classic Acacs  Culinary Water Provider	Lot Number # 2	Current Zoning	Acreage 5 - 25		
Culinary Water Provider	Secondary Water Provider	Waste Water Provider	Frontage		
Camaly Water Fortune	Jecondary Water Fronder	Traste Trater Frontaer	l		
Petailed Description of Proposed Use/S  Hay Brown	tructure			e1	
Property Owner Affidavit					
I (We), James Vis) and that the statements herein contain my (our) knowledge.	, depose and ned, the information provided in the at	say that I (we) am (are) the o tached plans and other exhib	owner(s) of the property identified in this app bits are in all respects true and correct to the	lication best of	
And		1			
(Property Owner)		(Property Owner)		-	
Subscribed and sworn to me this 2	G day of June , 20	,			
	COWW. EXP. 03-18-2023 COMMISSION NO. 705242	an In	oznaly "	Notary)	
	ANN J. MORBY	AND STATE OF THE S			
1	-				

Authorized Represen	tative Affidavit					
I (We),, the owner(s) of the real property described in the attached application, do authorized (our) representative(s),, to represent me (us) regarding the attached application and to application and to act in all respects as our agent in appertaining to the attached application.						
(Property Owner)			(Property Owner)			
Dated thisday signer(s) of the Representa	of, tive Authorization Affida	20, personally ap vit who duly acknowledge	opeared before meed to me that they executed the	e same.	, the	
					(Notary)	
		4				



**Customer Receipt** 

Receipt Number 110578

**Receipt Date** 

06/26/19

Received From: Jamie Vigil

Time:

11:49

Clerk: amorby

			CIEI K.	amorby
Description	Con	nment		Amount
ZONING FEES	Land	Use Permit		\$60.00
	Payment Type	Quantity	Ref	Amount
	CREDIT CARD			
	AMI	TENDERED:	\$60.00	
	AMT	APPLIED:	\$60.00	
	CHA	NGE:	\$0.00	