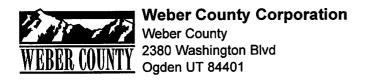
Subdivision and Property In  Subdivision Name  Approximate Address  (500(t))	Fees (Office Use)  formation  STREET  Total Acreage  1.2.5 Secondary Water Profession	Receipt Number (Office U	Number of Lots 31,32,33		
Subdivision and Property In Subdivision Name  NECE 10005  Approximate Address (1500(±) 2150 Nonca  Current Zoning  Culinary Water Provider  Property Owner Contact Info Name of Property Owner(s)  Plane Phone	STREET Total Acreage 12,8 Acres Secondary Water Proformation	LandSerial Number(s) 190640012 0012 0011  ovider	Number of Lots 31,32,33		
Approximate Address  (1900 t)  Approximate Address  (1900 t)  Current Zoning  Culinary Water Provider  Property Owner Contact Info  Name of Property Owner(s)  Plushon Property  Phone	Total Acreage 12,8 Acres Secondary Water Proformation	Land Serial Number(s) 140 640012 15012 10011	1/1EUT 31,32,33		
Approximate Address (1300(±) 2130 Nowth Current Zoning (Culinary Water Provider  Property Owner Contact Info Name of Property Owner(s) Plushon Property Phone	Total Acreage 12,8 Acres Secondary Water Proformation	Land Serial Number(s) 140 640012 15012 10011	1/1EUT 31,32,33		
Approximate Address  (1300(1)  (1300	Total Acreage 12,8 Acres Secondary Water Proformation	Land Serial Number(s) 140 640012 15012 10011	1/1EUT 31,32,33		
Current Zoning  Culinary Water Provider  Property Owner Contact Info  Name of Property Owner(s)  Plushon Property  Phone	Total Acreage 12 B Secondary Water Pro	140640012 -0012 -0011 ovider			
Current Zoning  Culinary Water Provider  Property Owner Contact Info  Name of Property Owner(s)  PINShon Property  Phone	Total Acreage 12 B Secondary Water Pro	DO12 Dovider			
Culinary Water Provider  Property Owner Contact Info Name of Property Owner(s) Plushon Property Phone	Secondary Water Proformation	ovider	Wastewater Treatment		
Property Owner Contact Info Name of Property Owner(s) Pinshon Property Phone	Secondary Water Proformation	ovider	Wastewater Treatment		
Property Owner Contact Info  Name of Property Owner(s)  Plushon Property  Phone	ormation		Wastewater Treatment		
Name of Property Owner(s) Pinshon Proper Phone		Mailing Address of Prop			
Name of Property Owner(s) Pinshon Proper Phone		Mailing Address of Prope			
Pinshon Praper	rties, LLC	Mailing Address of Prope			
	riles, LLC	2-2	Mailing Address of Property Owner(s)		
	Eav	3521 €.	100 KI,		
	rdx	RIGBY 1	D 83442		
Email Address	Email Address		Preferred Method of Written Correspondence		
rthegstad a hotmail. com					
Authorized Representative (					
Name of Person Authorized to Represe	ant the Property Owner(s)	Mailing Address of Author	orized Person		
SANDEULS ASSOCIA	Fax	•			
801-621-7303	1.54				
Email Address		Preferred Method of Wri	itten Correspondence		
SHANE @ SANDENG	AROHICOM	Email Fax Mail			
Surveyor/Engineer Contact I	Information				
Name or Company of Surveyor/Engine		Mailing Address of Surve	evor/Engineer		
SILVERPEARE	EDICI	maning reduces of Survey	-yor/ Liighteer		
Phone	Fax				
801-499-5054					
EmailAddress		Preferred Method of Written Correspondence			
Josh @ SILVENPEX	K-UTAH.COM	Email Fax	Mail		
Property Owner Affidavit					
0 1 0	1: 110				
and that the statements become	ATRES, LLC depose a	and say that I (we) am (are) the	owner(s) of the property identified in this application		
	ledge that during the subdivision rev	e attached plant and other out	owner(s) of the property identified in this applicatibits are in all respects true and correct to the bestined that additional requirements, covenants and		
agreements may be required to be co	onstructed or entered into.	process, it may be determ	mied that additional requirements, covenants and		
D 2166	+1				
14 porte	great		N.		
(Property Owner)		(Property Owner)	11164111111111111		
	and 1.1		WINNERCIAS CAN		
Subscribed and sworn to me this 2	3 day of July 2	019	Santial Miner Pub		
	U	Patricia	Santial : in		
		1	MY COMMISS EXPIRES 9-23-		

A STATE OF ID

Authorized Representative Affidavit	
Authorized Representative Amuavit	
I (We), Rinshon Properfies, Lithe owner(s) of the reauthorize as my (our) representative(s),	any administrative or legislative body in the County
(Property Owner)	(Property Owner)
(i opely game)	(Froperty Owner)
Dated this <u>23</u> day of <u>July</u> , 20 <u>19</u> personally appear who duly acknowledged to me that they executed the same.	Patricial Carty  Notary
	MY COMMISSION EXPIRES 9-23-2021  MY OF IDATE OF



**Customer Receipt** 

Receipt Number

113238

**Receipt Date** 

07/30/19

Received From:

Sanders Associates A

Time:

14:58

Clerk:

\$0.00

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			Olork.	21110109
Description	Comment		Amoun	
ZONING FEES				\$545.00
SURVEY SUBDIV				\$200.00
ENG SUBDIV FEES				\$200.00
	Payment Type	Quantity	Ref	Amount
	CHECK		2835	
	AMT	AMT TENDERED:		
	AMT APPLIED:		\$945.00	

**CHANGE:**