roperty Owner Contact Information  me of Property Owner(s) owbasin Resort Company  one     Fax  Fax  Mailing Address of Property Owner(s) PO Box 30825 Salt Lake City, UT 84130-0825						
Application submittals will be accepted by appointment only. (801) 399-8791. 2380 Washington Blvd. Suite 240, Ogden, UT 84401						
Date Submitted / Completed	Fees (Office Use)	Receipt Number (Office Use)	File Number (Office Use)			
Property Owner Contact	Information					
Name of Property Owner(s) Snowbasin Resort Company		PO Box 30825				
Phone (801) 620-1018	Fax	Jan Lake City, 01 04130-0023	,			
Email Address (required) jloomis@snowbasin.com		Preferred Method of Written C	Correspondence ] Mail			
Authorized Representativ	ve Contact Information					
Name of Person Authorized to Rep Pete Simmons Phone	present the Property Owner(s)	Mailing Address of Authorized 5710 South Green Street Salt Lake City, UT 84123	d Person			
(801) 518-7098 Email Address pete.simmons@taec.net	(801) 262-0428	Preferred Method of Written C	Torrespondence Mail			
Property Information						
Project Name Sal Snowbasin		Total Acreage	Current Zoning DRR-1			
Approximate Address No Physical Address (Sec 33, T6N, F	R1E)	Land Serial Number(s) 20-043-0005				
Proposed Use Communication Facility						
equipment shelter and a 67' mono the needed upgrade to the facilitie	pine. There is an existing wood pole as and discussions with Snowbasin Re to be installed down the ridge to the so	at the top of the ridgeline that VZW curr sort it has been determined that pole wi	ntion facility will consist of a 12' x 26' pre-fab ently has their equipment located on. Based on ill need to replaced. Snowbasin Resort has equipment shelter will be located to the east of			

Basis for Issuance of Conditional Use Permit
Reasonably anticipated detrimental effects of a proposed conditional use can be substantially mitigated by the proposal or by the imposition of reasonable conditions to achieve compliance with applicable standards. Examples of potential negative impacts are odor, vibration, light, dust, smoke, or noise. The proposed stealth communication facility will not have a detrimental effect on the surrounding area. By installing a stealth monopine amongst the existing vegetation and trees will help it to blend into the hillside. By locating the facility off of the existing ridge and removing the older pole will help to screen the facility from the UT-226 and the surrounding area. This is an unmanned facility that will not have any odor, vibration, light, dust, smoke, or noise associated with the facility.
That the proposed use will comply with the regulations and conditions specified in the Zoning Ordinance and other applicable agency standards for such use. Currently, Weber County does not have any set standards for telecommunication towers

to

Property Owner Affidavit	
I (We), Show Bosh Result Company, depose and say that and that the statements herein contained, the information provided in the attached my (our) knowledge.	I (we) am (are) the owner(s) of the property identified in this application plans and other exhibits are in all respects true and correct to the best of
(Property dwner)	(Property Owner)  VICKIE HARRIS
Subscribed and sworn to me this	NOTARY PUBLIC • STATE of UTAH COMMISSION NO. 607397 COMM. EXP. 06-16-2015 (Notary)
Authorized Representative Affidavit	
the owner(s) of the re (our) representative(s), to runy (our) behalf before any administrative or legislative body in the County consider pertaining to the attached application.	tal property described in the attached application, do authorized as my expresent me (us) regarding the attached application and to appear on ring this application and to act in all respects as our agent in matters
(Property Owner)	
	(Property Owner)
Dated thisday of	pefore me John Sommis the hat they executed the same.
VICKIE HARRIS  NOTARY PUBLIC • STATE of UTAH  COMMISSION NO. 607397  COMM. EXP. 06-16-2015	(Notary)
·	

33 1 89



## WEBER COUNTY CMS RECEIPTING SYSTEM OFFICIAL RECEIPT

cms314a Page 1 of 1

\*\*\* REPRINT \*\*\*

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

Date: 05-JUN-2014

Receipt Nbr: 3069

\$

ID# 21028

Employee / Department: ANGELA

- 4181 - PLANNING

.00

Monies Received From: TECHNOLOGY ASSOCIATES

Template: PUBLIC WORKS

Description: CUP

**Total Currency** 

Total Checks:		Total Check Amounts: \$ .00	
Check Amounts			
		TOTAL \$	225.00
2014-08-4181-3419-0550-000 ZONING	FEES		225.00
Account Number Acc	ount Name	Comments	Total
Grand Total	\$	225.00	
Total Checks	\$	.00	
٠			
Pre-deposit	\$	.00	
Total Debit/Credit C	ard <sub>\$</sub>	225.00	
Total Coin	\$	.00	
	Ψ	<del></del>	

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