

River Heights City Conditional Use Application

For office use	
Date Received:	<u>11/28/23</u>
Hearing Date:	<u>12/12/23</u>
Amount Paid:	<u>100.00</u>
Approved _____	Denied _____

APPLICANT

Name: Ardent Management, LLC
Mailing Address: 255 South Main Street Ste 100, Logan, Utah 84321
Phone: _____ email: _____
Please check one of the following: owner buyer renter agent other

PROJECT INFORMATION

Name: Sinclair Station
Address/Location: 594 South 400 East, River Heights, Utah 84321
Property Tax ID: 02-014-0060 Existing Zone: _____

What is the current use of the property? Photo Studio
How many employees will be working at this location including applicant, immediate family, and non-family members? 4 individuals

How many vehicles will be coming and going daily, weekly, or monthly? 4 daily
I agree to abide by the River Heights City Parking Ordinance (10-14). Initial TK
I agree to abide by the River Heights City Sign Ordinance (10-16). Initial TK

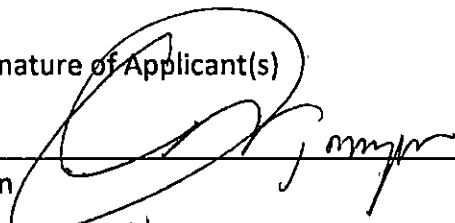
Description of Request: Owner, Tony Johnson, Property Management business office space. Ardent Management employees 2 full time employees and 1 part time employee. At most, there will be 4 employees (including Tony) vehicles on premises. All vehicles will be parked in driveway only, no street parking. Office hours are M-F 9:00am - 6:00pm, no weekends or holidays. We do not have a public customer base. Potentially up to 5 tenants/day may stop in to make rent payments around the 1st of each month. Tenants stopping in to make rent payments stop by individually and not with a group.

SUBMITTAL REQUIREMENTS

- Completed and signed application form
- \$100 application fee pd
- 8 1/2 x 11 copy of plans should be on file
- Provide a Fire Protection evaluation from the fire department. should be on file

ACKNOWLEDGMENT OF RESPONSIBILITY

I certify that I am making an application for the described action to the City and that I am responsible for complying with all City requirements in regard to this request. I realize in order to do any construction on the property, I will be required to obtain a Zoning Clearance Permit from River Heights City and possibly a County Building Permit. I also agree to meet the ordinances and standards of River Heights City for any improvements. The documents and/or information I have submitted are true and correct. I understand that my application is not deemed complete until the Planning Commission has reviewed the application and has given their approval in the form of a permit. I understand additional fees may be charged for the City's review of the proposal (including, but not limited to, engineering and attorney fees). I agree to reimburse River Heights City for any costs of enforcement including reasonable attorney fees, and/or any other costs of enforcement incurred by the City resulting from my failure to comply with the Land Use Ordinance and terms of this Conditional Use Permit.

Signature of Applicant(s)


Sign
11/27/2023

Date

Tony Johnson, Manager

Print

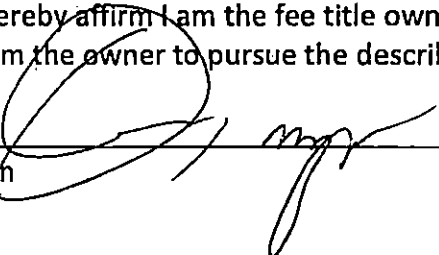
Sign

Date

Print

AFFIRMATION OF SUFFICIENT INTEREST

I hereby affirm I am the fee title owner of the above described property or I have written authorization from the owner to pursue the described action with a copy of the authorization attached.



Sign

11/27/2023

Date