

Garden City Business License Application

PO Box 207 • 69 N. Paradise Parkway • Garden City, Utah 84028
www.gardencityut.us • 435-946-2901 • 435-946-8852 Fax

*Sent for
Temp 6/17*

Business Status: ☒ New Business
(check all that apply) ☐ Additional Location # _____
☐ Name Change
☐ Ownership Change
☐ Location Change
☐ Transient Vendor
☐ Concessionaire Vendor

License Fee: Business License Fee 100. *pd. 11*
Transient License Fee *kt*
Concessionaire Fee _____
Additional Location _____
Other _____
Beach Vendor License also requires a BCI background check

Official Use Only:

Planning Commission: ☐ Approved ☐ Not Approved Date: _____
Town Council: ☐ Approved ☐ Not Approved Date: _____
Inspections: Building Insp.: ☐ Initial Date: _____ ☐ Final Date: _____
Fire Inspection: ☐ Initial Date: _____ ☐ Final Date: _____

Comments:

Zone: ☒ Commercial 1 2 3 ☐ Residential ☐ Beach Devel. ☐ Other _____

Business Name: Caribbean Custard LLC

If name change, previous name: _____

Location Address: 2115 S Bear Lake Blvd

City, State & Zip: Garden City, UT 84028

Business Phone: _____

Cell Phone: 435-770-2645

Mailing Address: 458 E 2720 N

City, State & Zip: North Logan, UT 84341

E-mail Address: dustin@fireflypowerbikes.com

Owners Name: Dustin Hansen

Owners Location: 458 E 2720 N

City, State & Zip: North Logan, UT 84341

Phone: _____

Cell Phone: 435-770-2645

Kind of Business ☒ Retail ☐ Lodging ☐ Restaurant
☐ Professional ☐ Contractor ☐ Other

Briefly Describe Your Business: Sale of custards and gelatin treats

Utah State Sales Tax Number: 21S07301 Temp

Ut State Professional License No. 12290542-0160

Will you be installing a sign?: ☒ Yes ☐ No

This is an application for a business license; the actual license will be issued only when **All** inspections/Approvals are complete. Issuance of this business license shall in no way relieve the applicant of his/her responsibility of complying with applicable zoning, health, building, or fire regulations.

I, We, Dustin Hansen hereby agree to conduct said business strictly in accordance with the laws and Ordinances covering such business. I understand that I shall not begin nor cause to begin business at this location without first obtaining a business license and will not continue business without maintaining a valid license, in doing so, I will be subject to a penalty as stipulated by the Garden City Infraction Fee Schedule. Business License Fees are non-refundable.

Signature: [Signature] **Date:** 6/16/21
print your name: Dustin Hansen

Garden City Business License Application

PO Box 207 • 69 N. Paradise Parkway • Garden City, Utah 84028.
www.gardencityut.us • 435-946-2901 • 435-946-8852 Fax

Business Status: (check all that apply) ☐ New Business ☐ Additional Location # _____ ☐ Name Change ☒ Ownership Change ☐ Location Change ☐ Transient Vendor ☐ Concessionaire Vendor	License Fee: <table style="width: 100%;"> <tr> <td>Business License Fee</td> <td style="text-align: right;">pd 100.00</td> </tr> <tr> <td>Transient License Fee</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Concessionaire Fee</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Additional Location</td> <td style="text-align: right;">_____</td> </tr> <tr> <td>Other</td> <td style="text-align: right;">_____</td> </tr> </table>	Business License Fee	pd 100.00	Transient License Fee	_____	Concessionaire Fee	_____	Additional Location	_____	Other	_____
Business License Fee	pd 100.00										
Transient License Fee	_____										
Concessionaire Fee	_____										
Additional Location	_____										
Other	_____										
Beach Vendor License also requires a BCI background check											

Official Use Only:			
Planning Commission:	☐ Approved	☐ Not Approved	Date: _____
Town Council:	☐ Approved	☐ Not Approved	Date: _____
Inspections: Building Insp.:	☐ Initial	Date: _____	☐ Final Date: _____
Fire Inspection:	☐ Initial	Date: _____	☐ Final Date: _____

Comments: _____

Zone: ☐ Commercial 1 2 3 ☐ Residential ☐ Beach Devel. ☐ Other _____

Business Name: RLS Enterprises LLC dba Qvenchers

If name change, previous name: _____

Location Address: 70 West Logan Road

City, State & Zip: Garden City UT 84028

Business Phone: 801-641-2212

Cell Phone: _____

Mailing Address: 1895 E. Brookhill Dr.

City, State & Zip: Cottonwood Heights UT 84121

E-mail Address: mrsshawka@comcast.net

Owners Name: Kristin L. Shaw

Owners Location: 1895 E. Brookhill Dr.

City, State & Zip: Cottonwood Heights UT 84121

Phone: 801-641-2212

Cell Phone: _____

Kind of Business:

☐ Retail	☐ Lodging	☒ Restaurant
☐ Professional	☐ Contractor	☐ Other

Briefly Describe Your Business: purchasing business from current owner - Amber Clark

selling soda & shakes and possibly a simple food concept

but keeping everything the same

Utah State Sales Tax Number: pending

Ut State Professional License No. _____

Will you be installing a sign?: ☐ Yes ☐ No already installed

This is an application for a business license; the actual license will be issued only when All inspections/Approvals are complete. Issuance of this business license shall in no way relieve the applicant of his/her responsibility of complying with applicable zoning, health, building, or fire regulations.

I, We, Kristin L. Shaw hereby agree to conduct said business strictly in accordance with the

Laws and Ordinances covering such business. I understand that I shall not begin nor cause to begin business at this

location without first obtaining a business license and will not continue business without maintaining a valid

license, in doing so, I will be subject to a penalty as stipulated by the Garden City Infraction Fee Schedule.

Business License Fees are non-refundable.

Owners Signature: Kristin L. Shaw **Date:** 6/29/2021

Please print your name: Kristin L. Shaw

Garden City Business License Application

PO Box 207 • 69 N. Paradise Parkway • Garden City, Utah 84028
www.gardencityut.us • 435-946-2901 • 435-946-8852 Fax

Business Status: (check all that apply) ☐ New Business ☐ Additional Location # _____ ☐ Name Change ☐ Ownership Change ☐ Location Change ☐ Transient Vendor ☐ Concessionaire Vendor	License Fee: Business License Fee _____ Transient License Fee _____ Concessionaire Fee _____ Additional Location _____ Other <u>add retail sales</u> _____ Beach Vendor License also requires a BCI background check
---	---

Official Use Only:

Planning Commission:	☐ Approved	☐ Not Approved	Date: _____
Town Council:	☐ Approved	☐ Not Approved	Date: _____
Inspections: Building Insp.:	☐ Initial Date: _____	☐ Final Date: _____	
Fire Inspection:	☐ Initial Date: _____	☐ Final Date: _____	

Comments:

Zone: ☒ Commercial 1 2 3 ☐ Residential ☐ Beach Devel. ☐ Other _____

Business Name: N-C CUSTOM DIRTS WORKS, INC

If name change, previous name: _____

Location Address: 425 S. BL BLVD

City, State & Zip: GARDEN CITY, UT 84028

Business Phone: _____

Cell Phone: 435-881-2641

Mailing Address: PO BOX 122

City, State & Zip: GARDEN CITY, UT 84028

E-mail Address: calderned@gmail.com

Owners Name: NED & TAMMY CALDER

Owners Location: _____

City, State & Zip: _____

Phone: _____

Cell Phone: _____

Kind of Business ☒ Retail ☐ Lodging ☐ Restaurant
☒ Professional ☐ Contractor ☐ Other

Briefly Describe Your Business: RETAIL SALES
currently approved for construction & raspberries

Utah State Sales Tax Number: _____

Ut State Professional License No. _____

Will you be installing a sign?: ☐ Yes ☐ No

This is an application for a business license; the actual license will be issued only when All inspections/Approvals are complete. Issuance of this business license shall in no way relieve the applicant of his/her responsibility of complying with applicable zoning, health, building, or fire regulations.

I, We, _____ hereby agree to conduct said business strictly in accordance with the Laws and Ordinances covering such business. I understand that I shall not begin nor cause to begin business at this location without first obtaining a business license and will not continue business without maintaining a valid license, in doing so, I will be subject to a penalty as stipulated by the Garden City Infraction Fee Schedule.

Business License Fees are non-refundable.

Owners Signature: [Signature] **Date:** 6-30-21

Please print your name: TAMMY E CALDER

Ready for
July T.C.

Parcel Number	Registered Address	Permit Holder Name 1	Contact Email
41172400041	353 W Wysteria Dr, Garden City, UT 84028, USA	Kevin Bouck	kbouck222@gmail.com

Created Date	Max Occupancy	Registration Number	Contact Phone
2021-06-11 01:59		13 STR21-00039	4357574500

Sent
6/11/21

Temp
approved
6/11/21

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 353 Wysteria Dr

Date of inspection: June 11, 2021

Owner: Kevin D Bouck

Safety Inspections:	Time limit to correct:									
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:	The garage is being counted to get enough parking spaces for the occupancy.									

	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sleeping Room										
Sq Ft.	13.5 x 10	12.5 x 13	10.5 x 11.5	11.5 x 10.5	11.5 x 10.5					
Exit Required	Y	Y	Y	Y	Y					
Window(s)	Y	Y	Y	Y	Y					
Smoke Detector	Y	Y	Y	Y	Y					
Total Sq. Ft.	135	162.5	120.75	120.75	120.75					

Total Occupancy allowed at this address: 13, shall not include children under the age of three (3).

Minimum parking required at this address: 4 Total number of parking spots on Property 4. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures: Glen Gillies Date: June 11, 2021

Inspector: Glen Gillies

Owner/Property Manager: _____

Short Term Rental Inspection Form

Owner/Responsible party KEVIN BOUCK Date 6-11-21

Address 353 WYSTERIA DR Suite/Apt#

Access

- ☒ Unobstructed area free of obstruction
- ☒ Provide address number visible from the street

Fire Extinguishers

- ☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen to adhere to
- ☒ Mount the extinguishers in plain view and access of kitchen
(may be mounted behind closet or cabinet door with placard on door)

- ☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

- ☒ Smoke/fire alarms in every bedroom, great room, and hall immediately adjacent to bedrooms
- ☒ One CO detector installed for each level of the home
- ☒ Smoke detector circumference and activate at the same time

Electrical, HAZMAT, and Storage

- ☒ Label electrical panel box location
- ☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous electrical cords
- ☒ No flammable liquids or gases in the entry/furnace room or closet. Free access to furnace/stove

Safety

- ☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Part 1 of 1

Inspected by [Signature] Title CHIEF

Date 6-11-21

Items that need to be corrected:

2776
9148

Registered Address	Permit Holder Name 1	Contact Email	Emergency Contact Phone
929 Harbor Village E Dr, Garden City, UT 84028, USA	Mark Bourne	drsarah27@gmail.com	4359463300

Created Date	Emergency Email	Permit Parking Spots	Max Occupancy
2021-05-27 11:48 AM	tryanstevens@gmail.com	2	6

Emergency Contact Name	Contact Phone	Certificate	Parcel Number
Todd Stevens	8015123087		41170900117

Status

Pending

Sale Tax ✓

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 929 N Harbor Village East Dr #117

Date of inspection: May 7, 2021

Owner: Mark Bourne

Safety Inspections:		Time limit to correct:								
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:										
Sleeping Room	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sq Ft.	14 x 13	12.5 x 13								
Exit Required	Y	Y								
Window(s)	Y	Y								
Smoke Detector	Y	Y								
Total Sq. Ft.	182	162.5	Total 344.5							

Total Occupancy allowed at this address: 6, shall not include children under the age of three (3).

Minimum parking required at this address: 2 Total number of parking spots on Property 2. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures: _____
 Date: May 7 2021

Inspector: Glen Gillies

May 7, 2021

Owner/Property Manager: _____

Short Term Rental Inspection Form

Owner/responsible party SARAH BOVRNE Date 5-14-21Address 929 N HARBOR VILLAGE EAST DRIVE Suite/Apt# # 117

Access

- ☒ Maintain fire lane free of obstruction
- ☒ Provide address numbers visible from the street

Fire Extinguishers

- ☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette
- ☒ Mount fire extinguishers in plain view and access of kitchen
(may be mounted behind closet or cabinet door with placard on door)
- ☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

- ☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms
- ☒ One CO detector installed for each level of the home
- ☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

- ☒ Label electrical panel box breakers
- ☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords
- ☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/utilities

Safety

- ☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Pass ☒ Fail ☐

Inspected by: [Signature] Title: CHIEFDate: 5-14-21

Items that need to be corrected:

Parcel Number	Registration Number	Registered Address	Permit Holder Name 1
41172400046	STR21-00013	341 W Posies Dr, Garden City, UT 84028, USA	Trevor Suelzle

Contact Email	Emergency Contact Phone	Signature	Created Date	Status	ID
tdsuelzle@gmail.com	8012321153	Trevor Suelzle	2021-03-08 03:11 PM	Pending	41698062

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 341 W. 805th Drive

Date of inspection: 3-3-21

Owner: _____

Safety Inspections:		Time limit to correct:
Handrails/Guardrails	✓	
Outdoor lights	✓	
Water shut off	✓	
Gas shut off	✓	
Electrical outlet plates	✓	
Check address on unit	✓	
Other:		

Sleeping Room Sq Ft.	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Exit Required										
Window(s)										
Smoke Detector							915.			
Total Sq. Ft.	130	194	289	100	100	100				

Total Occupancy allowed at this address: 16, shall not include children under the age of three (3).

Minimum parking required at this address: 4 Total number of parking spots on Property 4. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures: Inspector: [Signature] Date: 3-3-21

Owner/Property Manager: [Signature] 3/3/2021

Short Term Rental Inspection Form

Owner/responsible party TREVOR SUELZLE Date 3-5-21Address 341 POSIES DR. Suite/Apt# _____

Access

- ☒ Maintain fire lane free of obstruction
- ☒ Provide address numbers visible from the street

Fire Extinguishers

- ☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette
- ☒ Mount fire extinguishers in plain view and access of kitchen
(may be mounted behind closet or cabinet door with placard on door)
- ☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

- ☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms
- ☒ One CO detector installed for each level of the home
- ☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

- ☒ Label electrical panel box breakers
- ☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords
- ☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/utilities

Safety

- ☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Pass ☒ Fail _____

Inspected by: [Signature] Title: CHIEFDate: 3-5-21

Items that need to be corrected:

Parcel Number	Registration Number	Registered Address	Permit Holder Name 1	Contact Email
41170500042	STR21-00030	794 Cambry Dr, Garden City, UT 84028, USA	Brandon Taylor	btaylor18@gmail.com

Emergency Contact PH	Signature	Created Date	Permit Parking Spots	Max Occupancy
8013614381	Brandon Taylor	2021-04-20 09:08 PM	10	34

Emergency Contact Name	Status	ID
Brandon Taylor	Pending	46411735

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 794 Cambry

Date of inspection: 04/02/2021

Owner: Taylor

Safety Inspections:									Time limit to correct
Handrails/Guardrails	Y								
Outdoor lights	Y								
Water shut off	Y								
Gas shut off	Y								
Electrical outlet plates	Y								
Check address on unit	Y								
Other:									
Sleeping Room	#1	#2	#3	#4	#5	#6	#7	#8	#9
Sq Ft.	14 x 17	30 x 27	13 x 16	12 x 10	16 x 16	13.5 x 13.5	11 x 15		
Exit Required	Y	Y	Y	Y	Y	Y	Y		
Window(s)	Y	Y	Y	Y	Y	Y	Y		
Smoke Detector	Y	Y	Y	Y	Y	Y	Y		
Total Sq. Ft.	238	510	208	120	256	209.25	165	Total 1706.25	

Total Occupancy allowed at this address: 34, shall not include children under the age of three (3).

Minimum parking required at this address: 9 Total number of parking spots on Property 10. All vehicles, trailers, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Short Term Rental Inspection Form

Owner/responsible party Benson Taylor Date 4-7-21

Address 794 N. Cowboy Dr Suite/Apt# _____

Access

☒ Maintain fire lane free of obstruction

☒ Provide address numbers visible from the street

Fire Extinguishers

☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette

☒ Mount fire extinguishers in plain view and access of kitchen
(may be mounted behind closet or cabinet door with placard on door)

☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms

☒ One CO detector installed for each level of the home

☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

☒ Label electrical panel box breakers

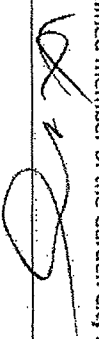
☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords

☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/utilities

Safety

☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Pass ☒ Fail ☐

Inspected by:  Title: CHIEF

Date: _____

Items that need to be corrected:

4/17

Parcel Number	Registered Address	Permit Holder Name 1	Contact Email
4117240022	636 N Lochwood Dr, Garden City, UT 84028, USA	Howard Goodman	matt@letsgetawayproperties.com

Created Date	Emergency Contact Name	Registration Number	Contact Phone
2021-06-12 08:47	Zack McKee	STR21-00041	4359998284

Sales Tax Number	Emergency Contact Phone	Max Occupancy	Emergency Email
14080940-003	4357572131	15	matt@letsgetawayproperties.com

Status

Pending

Temp
approved
ready
for
T.C.
agenda

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 636 Lochwood Dr

Date of inspection: June 9, 2021

Owner: Howard Goodman

Safety Inspections:	Time limit to correct:									
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:										

	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sleeping Room										
Sq Ft.	10 x 9	12.5 x 12.5	11.5 x 14.5	11 x 12.5	15 x 14.5					
Exit Required	Y	Y	Y	Y	Y					
Window(s)	Y	Y	Y	Y	Y					
Smoke Detector	Y	Y	Y	Y	Y					
Total Sq. Ft.	90	156.25	166.75	137.5	217.5					

Total Occupancy allowed at this address: 15, shall not include children under the age of three (3).

Minimum parking required at this address: 5 Total number of parking spots on Property 9. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures: Glen Gillies Date: June 01, 2021

Inspector: Owner/Property Manager:

Short Term Rental Inspection Form

Owner/responsible party Howard GoodmanDate 6-11-21Address 636 N. Locust St

Suite/Apt# _____

Access

☒ Maintain fire lane free of obstruction☒ Provide address numbers visible from the street

Fire Extinguishers

☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette☒ Mount fire extinguishers in plain view and access of kitchen

(may be mounted behind closet or cabinet door with placard on door)

☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms☒ One CO detector installed for each level of the home☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

☒ Label electrical panel box breakers☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/ventilates

Safety

☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District.

Pass ☒ Fail _____Inspected by: [Signature]

Title: _____

Date: _____

Parcel Number	Registered Address	Registered Unit Number	Permit Holder Name 1
41213120034	55 Buttercup Ln, Garden City, UT 84028, USA	34	Deanna Weierholt

Contact Email	Created Date	Emergency Contact Name	Registration Number
chuck@bearlakeci	2021-06-18 12:06 PM	Chuck Stocking	STR21-00043

Contact Phone	Sales Tax Number	Emergency Contact Phone	Max Occupancy
4357602327	15184416-003-STC	4357602327	15

Emergency Email	Permit Parking Spots	Status
chuck@bearlakeci	4	Pending

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 55 W Butternut Lane #34

Date of inspection: May 14, 2021

Owner: Deanna Weirholt

Safety Inspections:		Time limit to correct:								
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:										
Sleeping Room	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sq Ft.	16 X 22	11.5 X 13	10 X 13	8 X 9	9 X 9.5					
Exit Required	Y	Y	Y	Y	Y					
Window(s)	Y	Y	Y	Y	Y					
Smoke Detector	Y	Y	Y	Y	Y					
Total Sq. Ft.	352	149.5	130	72	85.5	Total 789				

Total Occupancy allowed at this address: 15, shall not include children under the age of three (3).

Minimum parking required at this address: 4 Total number of parking spots on Property 4. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures:

Signature: Glen Gillies
Inspector:

Date:

may 17, 2021

Owner/Property Manager:

ADMIRALS OASIS

Short Term Rental Inspection Form

Owner/responsible party DEANNA WEIERHOLT Date 5-20-21Address 55 W. BUTTERCUP LN. Suite/Apt# # 34

Access

- ☒ Maintain fire lane free of obstruction.
- ☒ Provide address numbers visible from the street

Fire Extinguishers

- ☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette
- ☒ Mount fire extinguishers in plain view and access of kitchen
(may be mounted behind closet or cabinet door with placard on door)
- ☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

- ☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms
- ☒ One CO detector installed for each level of the home
- ☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

- ☒ Label electrical panel box breakers
- ☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords
- ☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/utilities

Safety

- ☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Pass ☒ Fail ☐

Inspected by: [Signature] Title: CHIEF

Date: _____

Items that need to be corrected:

Parcel Number	Registered Address	Permit Holder Name 1	Contact Email
41213120012	602 S Amber Ln, Garden City, UT 84028, USA	James Johnson	chuck@bearlakecozycabins.com

Created Date	Emergency Contact Name	Registration Number	Contact Phone
2021-06-18 04:54	Chuck Stocking	STR21-00044	4357602327

Sales Tax Number	Emergency Contact Phone	Max Occupancy	Emergency Email
15184416-003-STI 4357602327			30'chuck@bearlakecozycabins.com

Permit Parking Spot	Status
8	Pending

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 602 S Amber Lane

Date of inspection: May 14, 2021

Owner: James Johnson

Safety Inspections:	Time limit to correct:									
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:										

Sleeping Room	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sq Ft.	13.5 x 15.5	10 x 15.5	12.75 x 14	13.5 x 15	14.5 x 12	12.5 x 10	16.5 x 19.5			
Exit Required	Y	Y	Y	Y	Y	Y	Y			
Window(s)	Y	Y	Y	Y	Y	Y	Y			
Smoke Detector	Y	Y	Y	Y	Y	Y	Y			
Total Sq. Ft.	209.25	155	178.5	202.5	174	125	321.75	Total 1546		

Total Occupancy allowed at this address: 30, shall not include children under the age of three (3).

Minimum parking required at this address: 8 Total number of parking spots on Property 8. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures: Date: May 17, 2021

Inspector: Glen Gillies

Owner/Property Manager:

EDGE OF THE LAKE**Short Term Rental Inspection Form**Owner/responsible party: JAMES JOHNSON Date 5-20-21Address: 602 S. AMBER LN. Suite/Apt# _____

Access

- ☒ Maintain fire lane free of obstruction
- ☒ Provide address numbers visible from the street

Fire Extinguishers

- ☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette
- ☒ Mount fire extinguishers in plain view and access of kitchen
(may be mounted behind closet or cabinet door with placard on door)
- ☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

- ☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms
- ☒ One CO detector installed for each level of the home
- ☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

- ☒ Label electrical panel box breakers
- ☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords
- ☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/utilities

Safety

- ☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Pass ☒ Fail ☐

Inspected by: [Signature] Title: CHIEF

Date: _____

Items that need to be corrected:

Parcel Number	Registered Address	Registered Unit Number	Permit Holder Name 1
41213120024	55 Buttercup Ln, Garden City, UT 84028, USA	24	Lauren Daniels

Contact Email	Created Date	Emergency Contact Name	Registration Number
chuck@bearlakeci	2021-06-24 04:14 PM	Chuck Stocking	STR21-00045

Contact Phone	Sales Tax Number	Emergency Contact Phone	Max Occupancy
4357602327	15184416-003-STC	4357602327	17

Emergency Email	Permit Parking Spots	Status
chuck@bearlakeci		5 Pending

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 55 W Buttercup Lane #23 & #24

Date of inspection: May 14, 2021

Owner: Lauren Daniels

Safety Inspections:	Time limit to correct:									
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:										

	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sleeping Room										
Sq Ft.	14.5 x 12.5	15 x 20	10 x 10	10 x 10	12 x 11.5					
Exit Required	Y	Y	Y	Y	Y					
Window(s)	Y	Y	Y	Y	Y					
Smoke Detector	Y	Y	Y	Y	Y					
Total Sq. Ft.	224.75	300	100	100	138	Total 862.75				

Total Occupancy allowed at this address: 17, shall not include children under the age of three (3).

Minimum parking required at this address: 5 Total number of parking spots on Property 5. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures:

Inspector: Glen Gillies

Date:

May 17, 2021

Owner/Property Manager:

THE H.107007

Short Term Rental Inspection Form

Owner/responsible party: Laura Daniels Date: 5-25-21

Address: 55 W. BUTTERCUP LN. Suite/Apt# #24

Access

☒ Maintain fire lane free of obstruction

☒ Provide address numbers visible from the street

☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette

☒ Mount fire extinguishers in plain view and access of kitchen

☒ (may be mounted behind closet or cabinet door with placard on door)

☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms

☒ One CO detector installed for each level of the home

☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

☒ Label electrical panel box breakers

☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords

☒ No flammable liquids or gases in the utility/furnace room or closet. Free access to furnace, utilities

☒ No obvious safety hazards determined at the discretion of the inspecting officer

Safety

☒ No obvious safety hazards determined at the discretion of the inspecting officer

Items that need to be corrected:

Inspected by: [Signature] Title: CHIEF

☒ Pass ☐ Fail

Inspected by a qualified member of the Garden City Fire District.

Certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been

Date: _____

Parcel Number	Registered Address	Permit Holder Name 1	Contact Email
41214700001	190 S Bear Lake Blvd, Garden City, UT 84028, USA	Kate Wahlquist	katesue333@gmail.com

Created Date	Emergency Contact Name	Registration Number	Contact Phone
2021-06-25 08:05	Tierney and Jesse Calder	STR21-00047	8017358788

Sales Tax Number	Emergency Contact Phone	Max Occupancy	Emergency Email
87-1370821	4352326502		8 tierneycalder@gmail.com

Permit Parking Spot	Status
2	Pending

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 190 s Bear Lake Blvd

Date of inspection: June 21, 2021

Owner: Wahlquist (Baby Bear)

Safety Inspections:						Time limit to correct:				
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:										
Sleeping Room	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sq Ft.	12 x 21	11 x 9	9 x 12	9 x 12						
Exit Required	Y	Y	Y	Y						
Window(s)	Y	Y	Y	Y						
Smoke Detector	Y	Y	Y	Y						
Total Sq. Ft.	252	99	108	108	Total 567					

Total Occupancy allowed at this address: 8, shall not include children under the age of three (3).

Minimum parking required at this address: 2 Total number of parking spots on Property 4. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures: Date: June 22, 2021

Inspector: Glen Gillies

Owner/Property Manager:

Short Term Rental Inspection Form

Owner/responsible party: Kate & Matthew Whitlough Date: 6-16-21

Address: 190 S. Bear Lake Blvd Suite/Apt# _____

Access

- ☒ Maintain fire lane free of obstruction
- ☒ Provide address numbers visible from the street

Fire Extinguishers

- ☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette
- ☒ Mount fire extinguishers in plain view and access of kitchen
- (may be mounted behind closet or cabinet door with placard on door)
- ☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

- ☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms
- ☒ One CO detector installed for each level of the home
- ☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

- ☒ Label electrical panel box breakers
- ☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords
- ☒ No flammable liquids or gases in the utility/furnace room or closet. Free access to furnace/utilities

Safety

☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Pass ☒ Fail ☐

Inspected by: MIKE WHITLUGH

Title: CHIEF

Date: 6-16-21

Items that need to be corrected:

Parcel Number	Registered Address	Registered Unit Number	Permit Holder Name 1
41171500303	920 Newberg Pl, Garden City, UT 84028, USA	3	David Briggs

Contact Email	Created Date	Emergency Contact Name	Registration Number
tryanstevens@gm	2021-06-24 04:51 PM	Todd Stevens	STR21-00046

Contact Phone	Sales Tax Number	Emergency Contact Phone	Max Occupancy
4359463300	146286601-004	8016641985	8

Emergency Email	Permit Parking Spots
tryanstevens@gm	2

Short Term Rental Inspection Form

81 LODGING

Owner/responsible party David Briggs Date 6-24-21

Address 920 N. Alameda Suite/Apt# #3

Access

☒ Maintain fire lane free of obstruction

☒ Provide address numbers visible from the street

Fire Extinguishers

☒ Have: new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette

☒ Mount fire extinguishers in plain view and access of kitchen

(may be mounted behind closet or cabinet door with placard on door)

☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

☒ Smoke/fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms

☒ One CO detector installed for each level of the home

☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

☒ Label electrical panel box breakers

☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords

☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/utility

Safety

☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Pass ☒ Fail ☐

Title: Chief

Inspected by: [Signature]

Date: _____

Items that need to be corrected: _____

Parcel Number	Registered Address	Registered Unit Number	Permit Holder Name 1
41171500102	942 Newberg Dr, Garden City, UT 84028, USA	2	Benjamin Forest

Contact Email	Created Date	Emergency Contact Name	Registration Number
tryanstevens@gm	2021-06-25 08:08 AM	Todd Stevens	STR21-00048

Contact Phone	Sales Tax Number	Emergency Contact Phone	Max Occupancy
8016641985	146286601-004	8016641985	6

Emergency Email	Permit Parking Spots
tryanstevens@gm	2

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 942 Newberg #2

Date of inspection: June 21, 2021

Owner: Ben Forest

Safety Inspections:	Time limit to correct:									
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:										

	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sleeping Room										
Sq Ft.	12.5 x 13.5	11 x 16.5								
Exit Required	Y	Y								
Window(s)	Y	Y								
Smoke Detector	Y	Y								
Total Sq. Ft.	168.75	181.5	Total	350.25						

Total Occupancy allowed at this address: 6, shall not include children under the age of three (3).

Minimum parking required at this address: 2 Total number of parking spots on Property 2. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures: Date: June 21, 2021
Inspector: Glen Gillies

Owner/Property Manager: _____

Short Term Rental Inspection Form

Owner/responsible party BEN FORREST Date 6-24-21
Address 942 Newburg Dr Suite/Apt# #3

Access

- ☒ Maintain fire lane free of obstruction
- ☒ Provide address numbers visible from the street

Fire Extinguishers

- ☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette
- ☒ Mount fire extinguishers in plain view and access of kitchen
- (may be mounted behind closet or cabinet door with placard on door)
- ☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

- ☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms
- ☒ One CO detector installed for each level of the home
- ☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

- ☒ Label electrical panel box breakers
- ☒ Cover plates on all junction boxes, outlets, switches, No exposed wiring/hazardous extension cords
- ☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/utility

Safety

- ☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. ☒ Pass ☐ Fail

Inspected by: [Signature] Title: CHIEF

Date: _____
Items that need to be corrected: _____

Parcel Number	Registration Number	Registered Address	Registered Unit #
41170400018	STR21-00026	893 Blackberry Dr, Garden City, UT 84028, USA	

Permit Holder Name	Contact Email	Emergency Contact #	Signature
Brandon Baker	bbaker1sr@gmail.com	4358907460	Brandon Baker

Created Date	Parking Spots	Max Occupancy	Emergency Contact Name
2021-04-13 01:4	12		30 Dan Kureck

Status
Pending

SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 893 Blackberry Drive

Date of inspection: March 31, 2021

Owner: Brandon Baker

Safety Inspections:		Time limit to correct:
Handrails/Guardrails	Y	
Outdoor lights	Y	
Water shut off	Y	
Gas shut off	Y	
Electrical outlet plates	Y	
Check address on unit	Y	
Other:		

	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sleeping Room										
Sq Ft.	34 x 16	12 x 14	12 x 14	14 x 11	13.5 x 13.5	13.5 x 14	13.5 x 14	13.5 x 11.5	9.5 x 12	
Exit Required	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Window(s)	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Smoke Detector	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Total Sq. Ft.	544	168	168	154	182.25	189	189	155.25	114	Total 1863.5

Total Occupancy allowed at this address: 30, shall not include children under the age of three (3).

Minimum parking required at this address: 8 Total number of parking spots on Property 12 All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures: Glen Gillies Date: March 31, 2021
Inspector: _____

Owner/Property Manager: _____

Short Term Rental Inspection Form

Owner/Responsible Party: BRANDON BAECH Date: 7-21-21

Address: 893 W 3000 S, BIRCHDALE, UT Suburb: _____

Apex: _____

☒ Marked fire line free of obstruction

☒ Provide address numbers visible from the street

Fire extinguishers

☒ Fire extinguisher is not obstructed and signed ABC tags for extinguisher for each sleeping room

☒ Marked fire extinguishers in plain view and correct location

☒ Fire extinguisher tested annually and with tagged date

☒ Extinguisher and tags accessible to fire extinguisher

Fire Alarm/CO Detectors

☒ Smoke/heat alarm works between great room, bedrooms, and fully accessible adjacent to bedrooms

☒ Fire extinguisher located for each level of sleeping

☒ Smoke detectors, carbon monoxide and CO detectors at the same time

Electrical, HAZARD, and Storage

☒ Label electrical panel box location

☒ No open flames or candles, oil, gas, or other flammable liquids or gases in use

☒ No flammable liquids or gases in the immediate room or closet for access to bedrooms/bathrooms

Safety

☒ No obvious safety hazards determined at the discretion of the inspector

I certify that all items on this form are in compliance with National, State, and local codes and ordinances and have been inspected by a qualified member of the Greater Utah Fire District. Page 1 of 1

Inspected by: MARK WILSON Date: 7-21-21

Owner: BRANDON BAECH

Notes that need to be corrected:

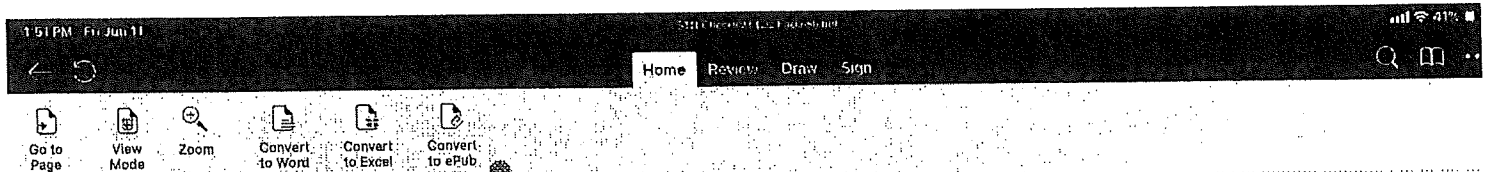
Parcel Number	Registered Address	Permit Holder Name 1	Contact Email
41172400051	373 W Rendezvous Way, Garden City, UT 84028, USA	Elizabeth Fackrell	elizabethluke1@gmail.com

Created Date	Max Occupancy	Registration Number	Contact Phone
2021-06-15 02:52		30 STR21-00042	4352946375

Status
Pending

Emergency Contact
is Jordan Hardinger ✓

Hubb Tot Dove ✓



SHORT TERM/NIGHTLY RENTAL INSPECTION CHECKLIST

Address: 373 W. Rendezvous Way

Date of inspection: June 11, 2021

Owner: Liz Packard

Safety Inspections:								Time limit to correct:		
Handrails/Guardrails	Y									
Outdoor lights	Y									
Water shut off	Y									
Gas shut off	Y									
Electrical outlet plates	Y									
Check address on unit	Y									
Other:	The Garage is being counted for parking to have the proper amount of parking spaces for occu									
Sleeping Room	#1	#2	#3	#4	#5	#6	#7	#8	#9	#10
Sq Ft.	13.5 x 15	13.5 x 10.5	13.5 x 12	6 x 15	10.5 x 13	10 x 11	29 x 24			
Exit Required	Y	Y	Y	Y	Y	Y	Y			
Window(s)	Y	Y	Y	Y	Y	Y	Y			
Smoke Detector	Y	Y	Y	Y	Y	Y	Y			
Total Sq. Ft.	202.5	141.75	162	90	136.5	110	896	Total	1538.75	

Total Occupancy allowed at this address: 30, shall not include children under the age of three (3).

Minimum parking required at this address: 8. Total number of parking spots on Property 9. All vehicles include trailer's, boats, motor homes, etc., shall park on property. Each trailer is considered a vehicle.

Signatures:

Inspector:

Glen Gillies

Date:

June 11, 2021

Short Term Rental Inspection Form

Owner/responsible party LIZ FACKRELL Date 6-11-21
Address 373 RONDZVOUS WAY Suite/Apt# _____

Access:

- ☒ Maintain fire lane free of obstruction
- ☒ Provide address numbers visible from the street

Fire Extinguishers

- ☒ Have new or refurbished and tagged ABC type fire extinguisher for each kitchen or kitchenette
- ☒ Mount fire extinguishers in plain view and access of kitchen
(may be mounted behind closet or cabinet door with placard on door)
- ☒ Provide free and clear access to the fire extinguisher

Fire Alarms/CO Detectors

- ☒ Smoke/Fire alarms in every bedroom, great room, and halls immediately adjacent to bedrooms
- ☒ One CO detector installed for each level of the home
- ☒ Smoke detectors communicate and activate at the same time

Electrical, HAZMAT, and Storage

- ☒ Label electrical panel box breakers
- ☒ Cover plates on all junction boxes, outlets, switches. No exposed wiring/hazardous extension cords
- ☒ No flammable liquids or gasses in the utility/furnace room or closet. Free access to furnace/utilities

Safety

- ☒ No obvious safety hazards determined at the discretion of the inspecting officer

I certify that all items on this list are in compliance with National, State, and Local codes and ordinances and have been inspected by a qualified member of the Garden City Fire District. Pass ☒ Fail _____

Inspected by: [Signature] Title: CHIEF

Date: 6-11-21

Items that need to be corrected: