



FARR WEST CITY COUNCIL AGENDA

November 3, 2022 at 7:00 p.m.

City Council Chambers

1896 North 1800 West

Farr West, UT 84404

Notice is hereby given that the City Council of Farr West City will hold its regular meeting at 7:00 pm on Thursday, November 3, 2022

1. Call to Order – Mayor Ken Phippen
2. Opening Ceremony
 - a. Pledge of Allegiance
 - b. Opening Prayer
3. Comments/Reports
 - a. Public Comments (*2 minutes*)
 - b. Report from the Planning Commission
4. Business Items
 - a. Approval of business licenses – T.H. Automotive LLC – Trebor Helmer
 - b. Approval of site plan and business license for the Fisher Family Homestead LLC assisted living facility located at 1300 North 2000 West
 - c. Approval of a new sign for Jiffy Lube located at 1783 West 2700 North – Identity Signs
 - d. Discussion/Action – 2700 North Pedestrian Crossing – Miles Robinson
 - e. Set joint work session with the Planning Commission for 6:00 p.m. on Thursday, December 8, 2022 to discuss JDC Ranch
 - f. Request to set a public hearing to consider a budget amendment and rate increase at the request of the city refuse hauler, Econo Waste
5. Consent Items
 - a. Motion - Approval of minutes dated October 6, 2022
 - b. Motion – Approval of bills dated November 2, 2022
 - c. Review of administratively approved business license
6. Mayor/Council Follow-up
 - a. Report on Assignments
7. Adjournment

In compliance with the American with Disabilities Act, individuals needing special accommodations (including auxiliary communicative aids and services) during this meeting should notify the City Recorder at 801-731-4187, at least three working days prior to the meeting. Notice of time, place and agenda of the meeting was emailed to each member of the City Council, posted in the City Hall, and posted on the Utah Public Meeting Notice Website on October 28, 2022.

Lindsay Afuvai
Recorder

Application for Business License



Application date: 10/25/22

Owner Name: Trebor Helmer

Owner Address: [REDACTED] City: [REDACTED] State: UT Zip: 84401

Telephone: [REDACTED] Fax: [REDACTED] Email: [REDACTED]

Business Name: T.H Automotive LLC DBA: T.H Automotive

Business Address: 3677 N. Highway 126 STEV City: Farr West State: UT Zip: 84401

Mailing Address: 3677 N. Highway 126 STEV City: Farr West State: UT Zip: 84401

Business Phone Number: 385-424-5495 Number of employees: 4

Manager Name: Trebor Contact Phone: 385-424-5495

**If business is commercial or manufacturing/warehousing, please list square footage: 3200 Sq Ft

State Sales Tax ID # 22400948 temp State License # 12666354-0151 EIN - 488-2179127

If a daycare of preschool, number of own children: _____; number of other children: _____

Describe your type of business in detail: Automotive detail, Repair, and maintenance

Businesses that require Health Department inspection and permit: ANY business that is selling food, tattoo and piercing salons, tanning salons, day cares, nursing and assisted livings.

Health Department Permit # _____ or check if not applicable _____

BUSINESS LICENSE FEE SCHEDULE

COMMERCIAL

Small (under 10,000 sq ft)	Medium (10,000 to 50,000 sq ft)	Large (over 50,000 sq ft)
\$100.00	\$200.00	\$300.00

↑

MANUFACTURING/WAREHOUSING

Small (under 10,000 sq ft)	Medium (10,000 to 50,000 sq ft)	Large (over 50,000 sq ft)
\$100.00	\$150.00	\$200.00



OTHER

Contractor	Professional	Interstate Commerce
\$100.00	\$50.00	\$50.00



ALCOHOL

Class "A" Beer	Class "B" Beer Restaurant	Class "C" Limited Restaurant	Class "D" Golf Course	Class "E" Full Service Restaurant
\$200.00	\$200.00	\$200.00	\$200.00	\$200.00

*If you are renewing an alcohol license:

Has the applicant been arrested or convicted of a felony or misdemeanor in the past 12 months? _____

Small commercial

Type of License Applying For: ~~Professional~~ License fee due: \$150

I, the applicant, am aware of and conform to all State and Federal Regulations. I have read and understand the Codes and Ordinances of Farr west City for Business License Regulations (Title 5).

Applicant signature: *[Signature]* Date: 10/25/22

For office use only:

Amount paid: 50- Date paid: 10/24/22 Receipt Number: 9.002190
City Council Date: ~~11/3/22~~ 11/3/22 Approved: _____ Disapproved: _____
License number: _____ Date issued: _____

Application for Site Plan Approval



1896 North 1800 West
Farr West, UT 84404
Phone – (801)731-4187
Fax – (801) 731-7732

Date Submitted: _____

Applicant Name: Sonia Fisher Applicant Address: _____

Phone: _____ Email: _____

Business Name: The Fisher Family Homestead LLC Application Number: _____

Business Address: _____ Phone: 801-564-7847

Address and description of site being considered: _____

2000 West 1300 North Farr West City

New construction on a greenfield.

Tax ID number of site being considered: 150040117

Current zoning of site: A-1

FEE SCHEDULE

Application: \$100.00 Engineering Deposit: \$1,000.00

Site Plan approval is required for the following conditions. Please indicate all conditions associated with this application:

- ☒ All proposed new development except single-family detached residences.
- ☐ All additions of alterations to nonconforming structures (see chapter 17.52 of the Farr West City municipal code for reference to nonconforming buildings).
- ☐ Issuance of a conditional use permit for new construction.
- ☒ New signs
- ☐ Modified site plan review shall be required for any change of use in a existing structure or site or addition, except single-family detached residences.
- ☐ All plans for earth sheltered dwellings.

The following information is required for site plan approval (check box next to all items submitted with application):

(Note: Not providing the required information will result in a delay of approval by the planning commission)

- ☒ A site plan (or set of plans as needed) showing all the required information listed below drawn accurately to an engineering scale. The plan needs to be submitted on 11x17, or larger paper, and in an electronic PDF format.
- ☒ Lot dimensions and orientations: North arrow, etc.
- ☒ Existing and proposed buildings with their dimensions and the locations of all opening in exterior walls.
- ☒ Height of all buildings and other proposed or existing structures; type and slope of roof construction.
- ☒ Indication of proposed use of buildings.
- ☒ All off street parking, locations and size of points of entry and exists, loading facilities, internal traffic circulation patterns, location of handicapped parking and handicapped access to building(s).
- ☒ Height of all existing and proposed walls and fences and type of construction.
- ☒ Location and type of landscaping.
- ☒ All existing easements (dedicated and prescriptive), irrigation ditches, alleys and street rights of ways. Locations and height of any overhead power and communication and transmission lines, and all utility easements which may affect the property.
- ☒ All existing and proposed improvements. Improvements include: curb and gutter, sidewalks, sanitary and storm sewer lines, fire hydrants and driveway approaches. Grades must be shown for curb and gutter, sidewalks, sanitary and storm sewer lines.
- ☒ Location, type, lighting and size of proposed and existing signs.
- ☒ Location, type and size of proposed and existing light poles.
- ☒ A method for controlling storm drainage so that storm runoff will not enter adjoining property must be shown.
- ☒ One copy of a current county ownership plat showing the property and adjacent properties.
- ☐ Approval letter from Weber Fire District (801-782-3580).
- ☒ Approval letter from Bona Vista Water (801-621-0474).

If any of the above information is not being provided please indicate reasoning:

Weber fire marshal David Reed has emailed that the "location will work", but they do not provide will serve or approval letters. They serve all structures by law, and review new buildings once full construction documents with stamps have been completed. He said he would contact the city to get on the same page and would take care of whatever we need to get site plan approval

Answer the following questions as applicable: (Attach additional paper if needed.)

1. State in detail what is intended to be done on or with the property? _____

Construction of an 11,200 sf 16 unit assisted living facility along with a 1,400 sf manager home.

2. How will the proposed use be compatible with existing surrounding uses, buildings, and structures, when considering traffic generation, parking, building design, location and landscaping?

The architecture of the assisted will be in the farmhouse style with a large covered porch that is consistent with the surrounding buildings. Assisted living facilities have minimal traffic which will not adversely affect the traffic flow.

Signature of Applicant:

Applicant acknowledges they are responsible for all engineering fees associated with this application.

In issuing this application the signer(s) certifies the information provided is correct and they agree to the conditions set by the members of the planning commission and city council. **All** property owners must sign below in the presence of the city recorder/clerk or have their signatures notarized in order to be valid.

Val S Fisher

Owner Signature

Val S. Fisher

Print Name

Sonia Fisher

Owner Signature

Sonia Fisher

Print Name

I/We authorize Val S. + Sonia to act as my/our agent in all matters relating to this application.
(Print name) Fisher

Val S Fisher

Owner Signature

Val S. Fisher

Print Name

Sonia Fisher

Owner Signature

Sonia Fisher

Print Name

Authorized Agent Signature

Signature of City Recorder/Clerk
(Not Required if Notarized)

State of Utah)

§

Count of Weber)

On this 27 day of April, in the year 2022, before me McKenna Kennedy,
a notary public, personally appeared Val S Fisher, proved
on the basis of satisfactory evidence to be the person(s) whose name(s) (is/are) subscribed to this instrument,
and acknowledge (he/she/they) executed the same. Witness my hand and official seal.



McKenna Kennedy
NOTARY PUBLIC

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A
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State of Utah)

County of Neber)
§

On this 27 day of April, in the year 2022, before me McKenna Kennedy, a notary public, personally appeared Sonia Fisher, proved on the basis of satisfactory evidence to be the person(s) whose name(s) (is/are) subscribed to this instrument, and acknowledge (he/she/they) executed the same. Witness my hand and official seal.



McKenna Kennedy
NOTARY PUBLIC

S
E
A
L

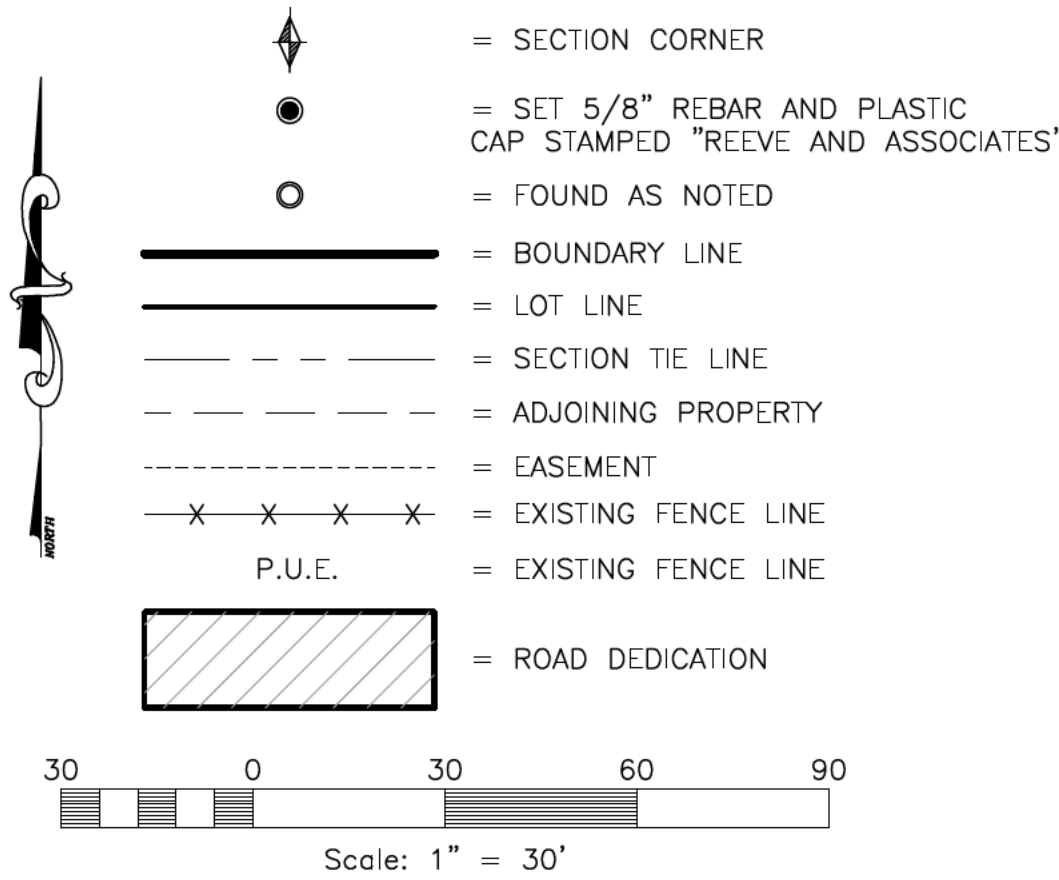
For City Use:

Fee received by: McKinzie Date received: 4.27.22
Receipt number: 9-001980 Cash/Check (circle one) .
Date site plan received: 4.27.22 Received by: McKinzie
Date met with city engineer: _____ Signed: _____
Date engineer approved plan: _____ Signed: _____
Date planning commission approved: _____
Date city council approved (conditional use permit only): _____



VICINITY MAP
SCALE: NONE

LEGEND



BASIS OF BEARINGS

THE BASIS OF BEARINGS FOR THIS SURVEY IS THE LINE BETWEEN TWO FOUND MONUMENTS AT THE EAST QUARTER CORNER AND SOUTHEAST CORNER OF SECTION 2, TOWNSHIP 6 NORTH, RANGE 2 WEST, SALT LAKE BASE AND MERIDIAN, U.S. SURVEY, SHOWN HEREON AS S00°37'40"W.

NARRATIVE

THE PURPOSE OF THIS PLAT IS TO DIVIDE THE BELOW DESCRIBED PROPERTY INTO LOTS AS SHOWN. THE NORTH LINE WAS PLACED ALONG THE SURVEYED SOUTH LINE OF PARCEL # 15-004-0084 AS PER RECORD OF SURVEY # 4426. THE EAST LINE WAS PLACED ALONG THE WESTERLY RIGHT OF WAY LINE OF I-15 AS PER RECORD OF SURVEY # 4267, WHICH MATCHES OCCUPATION WELL AND A FOUND PIPE. THE SOUTH LINE WAS PLACED ALONG THE DEED LINE. THE WEST LINE WAS ALSO PLACED ALONG THE DEED, WITH THE SHOWN PROPOSED RIGHT OF WAY BEING DETERMINED BY THE RIGHT OF WAY SHOWN ON THE BONA VISTA WEBER FIRE SUBDIVISION. ALL REAR LOT CORNERS WERE SET WITH A 5/8" X 24" REBAR AND PLASTIC CAP STAMPED "REEVE & ASSOCIATES".

BOUNDARY DESCRIPTION

PART OF THE SOUTHEAST QUARTER OF SECTION 2, TOWNSHIP 6 NORTH, RANGE 2 WEST, SALT LAKE BASE AND MERIDIAN, U.S. SURVEY. MORE PARTICULARLY DESCRIBED AS FOLLOWS:

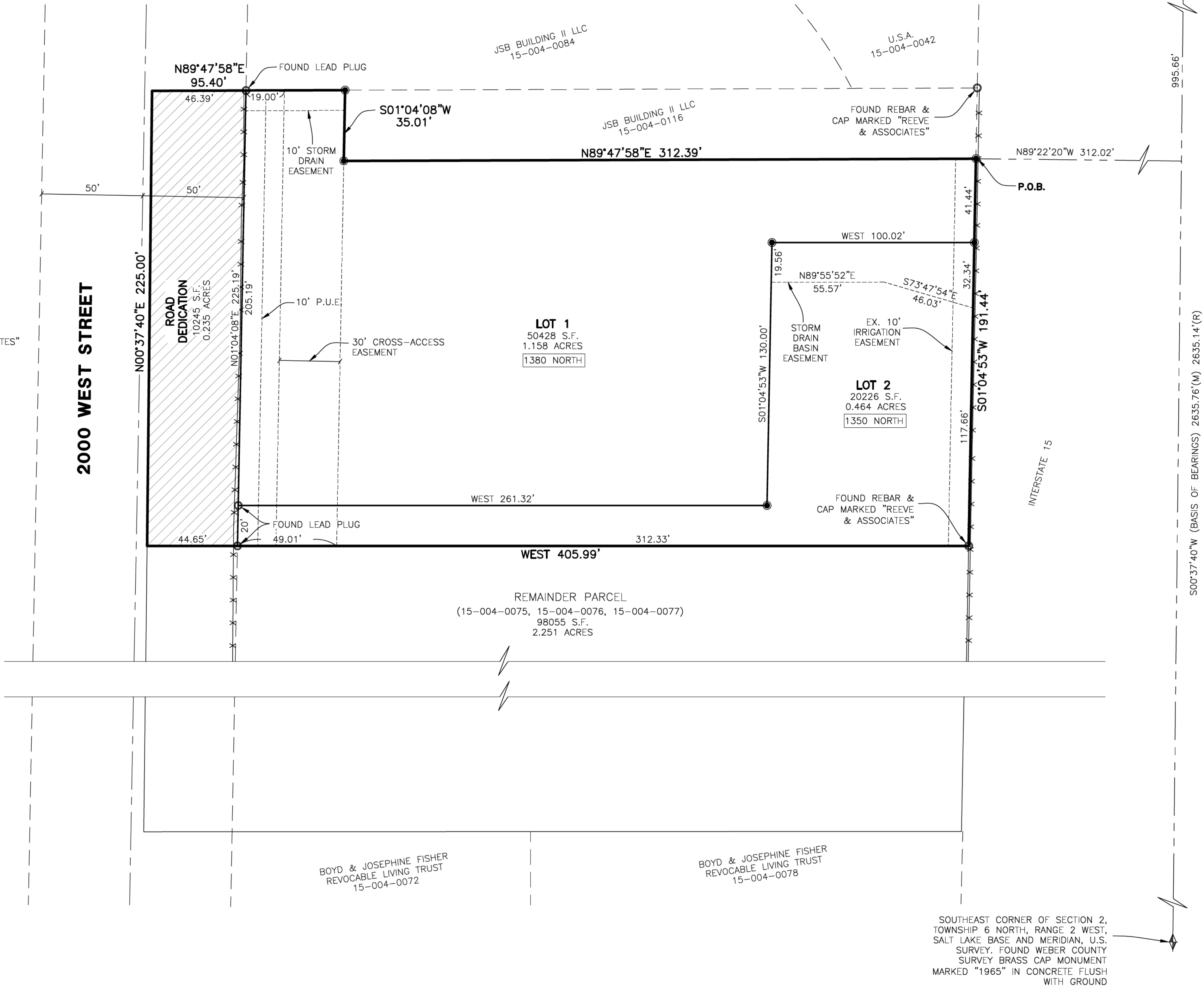
BEGINNING AT A POINT IN AN EXISTING FENCE LINE, SAID POINT BEING S00°37'40"W 995.66 FEET AND N89°22'20"W 312.02 FEET FROM THE EAST QUARTER CORNER OF SAID SECTION 2; THENCE S01°04'53"W 191.44 FEET; THENCE WEST 405.99 FEET; THENCE N00°37'40"E 225.00 FEET; THENCE N89°47'58"E 95.40 FEET; THENCE S01°04'08"W 35.01 FEET; THENCE N89°47'58"E 312.39 FEET TO AN EXISTING FENCE LINE AND TO THE POINT OF BEGINNING.

CONTAINING 80,899 SQUARE FEET OR 1.857 ACRES MORE OR LESS.

THE FISHER FAMILY HOMESTEAD

PART OF THE SOUTHEAST QUARTER OF SECTION 2, TOWNSHIP 6 NORTH, RANGE 2 WEST, SALT LAKE BASE AND MERIDIAN, U.S. SURVEY
FARR WEST CITY, WEBER COUNTY, UTAH
MAY, 2022

EAST QUARTER CORNER OF SECTION 2, TOWNSHIP 6 NORTH, RANGE 2 WEST, SALT LAKE BASE AND MERIDIAN, U.S. SURVEY. FOUND WEBER COUNTY SURVEY BRASS CAP MONUMENT MARKED "2005" IN CONCRETE 10" BELOW GROUND



FARR WEST CITY PLANNING COMMISSION

APPROVED BY THE FARR WEST CITY PLANNING COMMISSION

THIS _____ DAY OF _____, 20____.

CHAIRMAN

FARR WEST CITY ENGINEER

APPROVED BY THE FARR WEST CITY ENGINEER

THIS _____ DAY OF _____, 20____.

FARR WEST CITY ENGINEER

FARR WEST ACCEPTANCE

THIS IS TO CERTIFY THAT THIS PLAT AND DEDICATION OF THIS PLAT WERE DULY APPROVED AND ACCEPTED BY FARR WEST CITY, WEBER COUNTY, UTAH.

THIS _____ DAY OF _____, 20____.

ATTEST:

TITLE:

FARR WEST CITY ATTORNEY

I HEREBY CERTIFY THAT THE REQUIREMENTS OF ALL APPLICABLE STATUTES AND ORDINANCES PREREQUISITE TO APPROVAL BY THE _____ OF THE FOREGOING PLAT AND DEDICATIONS HAVE BEEN COMPLIED WITH.

SIGNED THIS _____ DAY OF _____, 20____.

Weber County Recorder

Entry No. _____ Fee Paid _____

And Recorded, _____ Filed For Record

At _____ in Book _____

Of The Official Records, Page _____

Recorded For: _____

Weber County Recorder

Deputy.

SURVEYOR'S CERTIFICATE

I, **TREVOR J. HATCH**, DO HEREBY CERTIFY THAT I AM A PROFESSIONAL LAND SURVEYOR IN THE STATE OF UTAH IN ACCORDANCE WITH TITLE 58, CHAPTER 22, PROFESSIONAL ENGINEERS AND PROFESSIONAL LAND SURVEYORS ACT; AND THAT I HAVE COMPLETED A SURVEY OF THE PROPERTY DESCRIBED ON THIS PLAT IN ACCORDANCE WITH SECTION 17-23-17 AND HAVE VERIFIED ALL MEASUREMENTS, AND HAVE PLACED MONUMENTS AS REPRESENTED ON THIS PLAT, AND THAT THIS PLAT OF **THE FISHER FAMILY HOMESTEAD** IN **FARR WEST CITY, WEBER COUNTY, UTAH**, HAS BEEN DRAWN CORRECTLY TO THE DESIGNATED SCALE AND IS A TRUE AND CORRECT REPRESENTATION OF THE HEREIN DESCRIBED LANDS INCLUDED IN SAID SUBDIVISION, BASED UPON DATA COMPILED FROM RECORDS IN THE **WEBER COUNTY** RECORDER'S OFFICE AND FROM SAID SURVEY MADE BY ME ON THE GROUND. I FURTHER CERTIFY THAT THE REQUIREMENTS OF ALL APPLICABLE STATUTES AND ORDINANCES OF **FARR WEST CITY, WEBER COUNTY**, CONCERNING ZONING REQUIREMENTS REGARDING LOT MEASUREMENTS HAVE BEEN COMPLIED WITH.

SIGNED THIS _____ DAY OF _____, 20____.

9031945

UTAH LICENSE NUMBER



OWNERS DEDICATION AND CERTIFICATION

WE THE UNDERSIGNED OWNERS OF THE HEREIN DESCRIBED TRACT OF LAND, DO HEREBY SET APART AND SUBDIVIDE THE SAME INTO LOTS AND STREETS AS SHOWN ON THE PLAT AND NAME SAID TRACT **THE FISHER FAMILY HOMESTEAD**, AND DO HEREBY DEDICATE TO UDOT ALL THOSE PARTS OR PORTIONS OF SAID TRACT OF LAND DESIGNATED AS ROAD DEDICATION, THE SAME TO BE USED AS PUBLIC THOROUGHFARES AND ALSO TO GRANT AND DEDICATE A PERPETUAL RIGHT AND EASEMENT OVER, UPON AND UNDER THE LANDS DESIGNATED HEREON AS PUBLIC UTILITY AND DRAINAGE EASEMENTS, SEWER EASEMENTS, AND IRRIGATION CANAL EASEMENTS, THE SAME TO BE USED FOR THE INSTALLATION MAINTENANCE AND OPERATION OF PUBLIC UTILITY SERVICE LINE, STORM DRAINAGE FACILITIES, IRRIGATION CANALS OR FOR THE PERPETUAL PRESERVATION OF WATER CHANNELS IN THEIR NATURAL STATE WHICHEVER IS APPLICABLE AS MAY BE AUTHORIZED BY THE GOVERNING AUTHORITY, WITH NO BUILDINGS OR STRUCTURES BEING ERECTED WITHIN SUCH EASEMENTS, AND DO HEREBY DEDICATE A 30' CROSS ACCESS EASEMENT AS SHOWN HEREON TO ALL LOT OWNERS, THEIR HEIRS AND ASSIGNS, AND DO HEREBY DEDICATE THE STORM DRAIN AND DETENTION BASIN EASEMENT SHOWN HEREON TO THE PROPERTY OWNER, TO BE MAINTAINED BY THE SAME.

SIGNED THIS _____ DAY OF _____, 20____.

ACKNOWLEDGMENT

STATE OF UTAH)ss.
COUNTY OF _____)

ON THE _____ DAY OF _____, 20____, PERSONALLY APPEARED BEFORE ME, THE UNDERSIGNED NOTARY PUBLIC, _____ SIGNER(S) OF THE ABOVE OWNER'S DEDICATION AND CERTIFICATION, WHO BEING BY ME DULY SWORN, DID ACKNOWLEDGE TO ME _____ SIGNED IT FREELY, VOLUNTARILY, AND FOR THE PURPOSES THEREIN MENTIONED.

COMMISSION EXPIRES _____

NOTARY PUBLIC

ACKNOWLEDGMENT

STATE OF UTAH)ss.
COUNTY OF _____)

ON THE _____ DAY OF _____, 20____, PERSONALLY APPEARED BEFORE ME, THE UNDERSIGNED NOTARY PUBLIC, _____ BEING BY ME DULY SWORN, ACKNOWLEDGED TO ME THEY ARE _____ OF _____ AND THAT THEY SIGNED THE ABOVE OWNER'S DEDICATION AND CERTIFICATION FREELY, VOLUNTARILY, AND IN BEHALF OF SAID CORPORATION FOR THE PURPOSES THEREIN MENTIONED.

COMMISSION EXPIRES _____

NOTARY PUBLIC

Project Info.

Surveyor: T. HATCH

Designer: E. ROCHE

Begin Date: 5-10-21

Name: THE FISHER

FAMILY HOMESTEAD

Number: 7570-01

Revision: 5-20-22

Scale: 1"=30'

Checked: _____



Reeve & Associates, Inc.

5160 S 1500 W, RIVERDALE, UTAH 84405
TEL: (801) 621-3100 FAX: (801) 621-2666 www.reeve-associates.com

MEMORANDUM



CONSULTING ENGINEERS

TO: Farr West City Planning Commission and City Council

FROM: Matt Robertson, P.E.
City Engineer

RE: **FISHER FAMILY HOMESTEAD**
Site Plan and Subdivision Plat Review

Date: October 6, 2022

Our office has completed a review of the site plan and subdivision plat for the Fisher Family Homestead located at 1300 North 2000 West. We have gone through multiple reviews on the site plan and plat and they have addressed all comments and received all necessary agency approvals. The plans generally conform with City standards, and we recommend final approval of this development subject to the following comments:

1. Prepare and Storm Water Pollution Prevention Plan (SWPPP) and file a Notice of Intent (NOI) with the State prior to beginning any construction.
2. A pre-construction conference with the Developer and their Contractor should be held with the City and utility providers prior to beginning any construction.

Please let me know if you have any further questions.

Application for Business License



Application date: 02-²²~~17~~-2022

Owner Name: Val & Sonia Fisher

Owner Address: [REDACTED] City: [REDACTED] State: [REDACTED]

Telephone: [REDACTED] Fax: [REDACTED] Email: [REDACTED]

Business Name: The Fisher Family Homestead Assisted Living Home DBA: [REDACTED]

Business Address: Approx. 1350 N 2000 W City: Farr West State: UT Zip: 84404

Mailing Address: 6467 S 1850 E City: Ogden State: UT Zip: 84405

Business Phone Number: 801-564-7847 Number of employees: up to 20 when completed

Manager Name: Sonia Fisher Contact Phone: 801-564-7847

**If business is commercial or manufacturing/warehousing, please list square footage: 12,317

State Sales Tax ID # [REDACTED] State License # [REDACTED]

If a daycare of preschool, number of own children: n/a; number of other children: n/a

Describe your type of business in detail: 16 Bed Assisted Living Home with common gathering area, activity area, dining area, employee run kitchen for cooking for residents, parking for employees & guests.

Businesses that require Health Department inspection and permit: ANY business that is selling food, tattoo and piercing salons, tanning salons, day cares, nursing and assisted livings.

Health Department Permit # [REDACTED] or check if not applicable [REDACTED]

BUSINESS LICENSE FEE SCHEDULE

COMMERCIAL

Small (under 10,000 sq ft)	Medium (10,000 to 50,000 sq ft)	Large (over 50,000 sq ft)
\$100.00	\$200.00	\$300.00

MANUFACURING/WAREHOUSING

Small (under 10,000 sq ft)	Medium (10,000 to 50,000 sq ft)	Large (over 50,000 sq ft)
\$100.00	\$150.00	\$200.00

OTHER

Contractor	Professional	Interstate Commerce
\$100.00	\$200.00 50.00	\$50.00

ALCOHOL

Class "A" Beer	Class "B" Beer Restaurant	Class "C" Limited Restaurant	Class "D" Golf Course	Class "E" Full Service Restaurant
\$200.00	\$200.00	\$200.00	\$200.00	\$200.00

*If you are renewing an alcohol license:

Has the applicant been arrested or convicted of a felony or misdemeanor in the past 12 months? no

Type of License Applying For: Professional License fee due: 50-

I, the applicant, am aware of and conform to all State and Federal Regulations. I have read and understand the Codes and Ordinances of Farr west City for Business License Regulations (Title 5).

Applicant signature: Sonia Fisher Date: 2/22/22

For office use only:

Amount paid: 50- Date paid: 2/22/2022 Receipt Number: 6-006267
City Council Date: _____ Approved: _____ Disapproved: _____
License number: _____ Date issued: _____

Application for Sign Approval



This application is to be used for temporary commercial signs (including any banner signs), new permanent signs, or in the event that a simple change of signs is being requested and no construction or external remodeling is being accomplished which would require a full site plan.

Date Submitted: 12/10/22 Applicant Name: Identity Signs
Applicant Address: _____ City: _____ State: _____ Zip: _____
Phone: 801 746-4750 Email: kara@idsignco.com

SIGN PERMIT FEE SCHEDULE

Site Plan: \$25.00

Sign Erection or Relocation: \$25

Business Name: Jiffy Lube Address: 1783 W. 2700 N.

Description of site being considered:

Install Monument sign in front of location

Tax ID number: 87-0629644 Current zoning of site: C-2

Abbreviated Site Plan:

Provide a scale drawing that clearly shows the following:

- Location, type, lighting and size of proposed and existing signs.
- Materials to be used for the construction of this sign.

If any of the above information is not being provided, please indicate reasoning:

n/a

How will the proposed sign be compatible with existing surrounding uses, buildings and structures when considering traffic generation, parking, building design, location and landscaping? Monument sign to be installed to direct customers to business. It is in front building on lawn area.

Application for Sign Approval



The following conditions will apply to this sign application: n/a

Expiration Date for the use of a temporary sign: n/a

All fields must be filled out before application will be considered. ('N/A' fields not applicable)

Signature of Applicant:

In issuing this application the signer(s) certifies the information provided is correct and they agree to the conditions set by the planning commission and/or city council

Business Owner/Sign Company Signature Kara Lopez
Print Name Kara Lopez c/o Identity Signs

Property Owner Signature [Signature]
Print Name D.J. Griffin

For City Use:

Fee Paid \$ 25 Received By: McKinzie

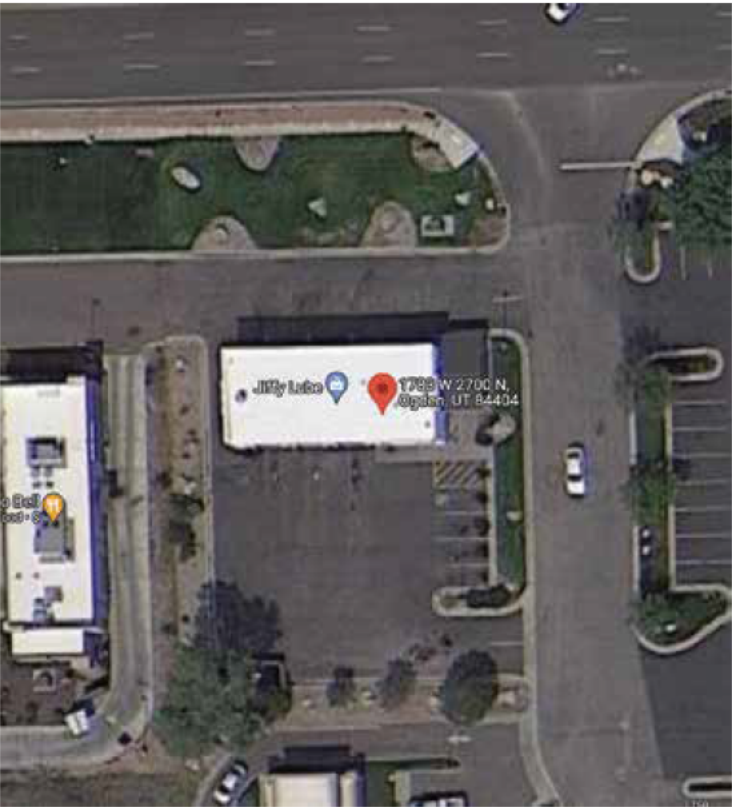
Planning Commission/City Council Review Checklist.

- ☐ Has all the required information been provided for review where applicable?
- ☐ Does the proposed sign conform to the City Sign Ordinance?
- ☐ Has the plan been reviewed by the City Engineer/Bldg Official and all concerns addressed?

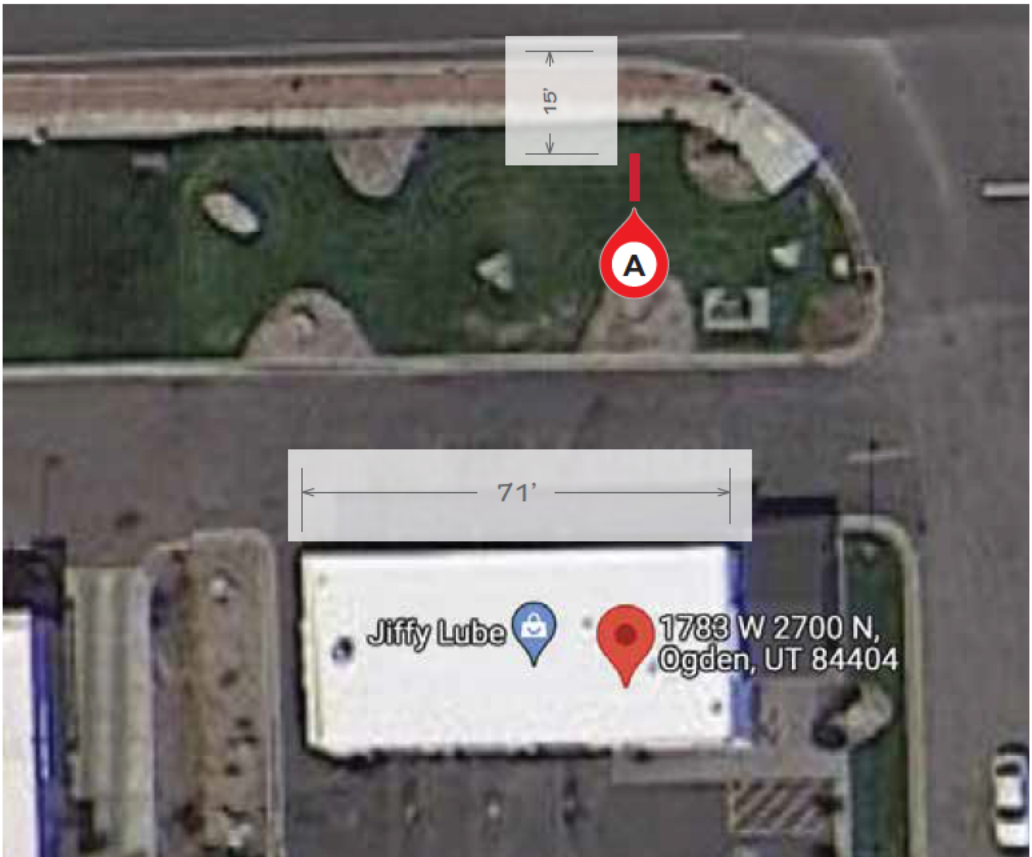
VICINITY MAP



PROPERTY MAP



SITE PLAN



SIGN LEGEND

A

Monument Sign

qty 158.7ft²D/S

jiffylubemulticare

PERMITS



Salt Lake, UT | Seattle, WA
801.748.4750
sales@idsignco.com

Job # 48057

Client
Griffin Fast Lube Management

Address
1783 W 2700 N
Farr West, UT 84404

Zone
Commercial

© 2022
Identity Signs
All designs represented are the sole property of identity signs, and may not be reproduced in part or whole without written permission from Identity Signs.

Sales Person
Brent Albers

Project Manager
Kara Lopez

Designer
Punga Vea

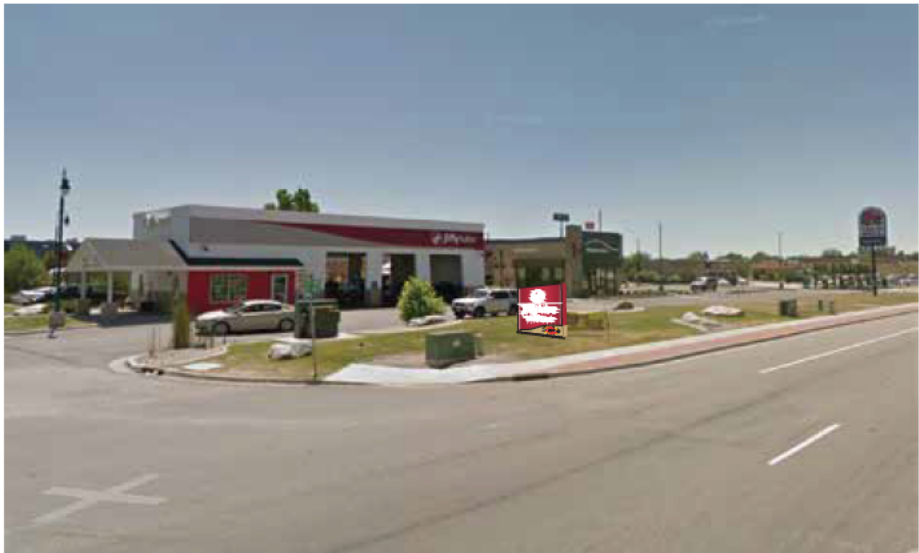
A SIGN TYPE [Monument]		
Description Lit Aluminum Monument		
Voltage Existing		
Square Feet of Proposed Sign	58.7	Sign Weight 000 lbs Elevation N

EXISTING CONDITIONS

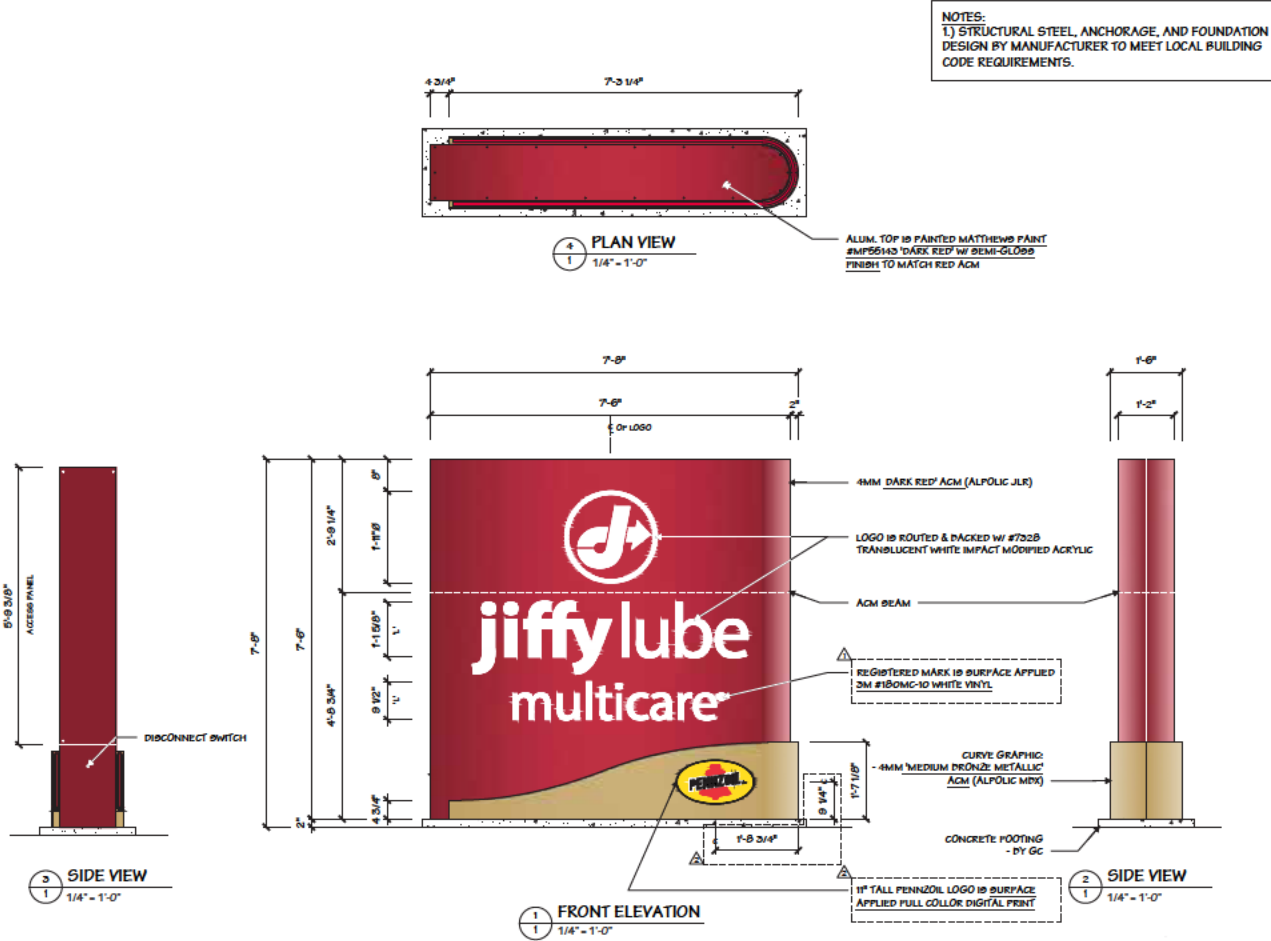


Site Notes/Prep
Remove existing sign face

SIGN RENDERING



SIGN SPECIFICATIONS



Salt Lake, UT | Seattle, WA
801.748.4750
sales@idsignco.com

Job # 48057

Client
Griffin Fast Lube Management

Address
1783 W 2700 N
Farr West, UT 84404

Zone
Commercial

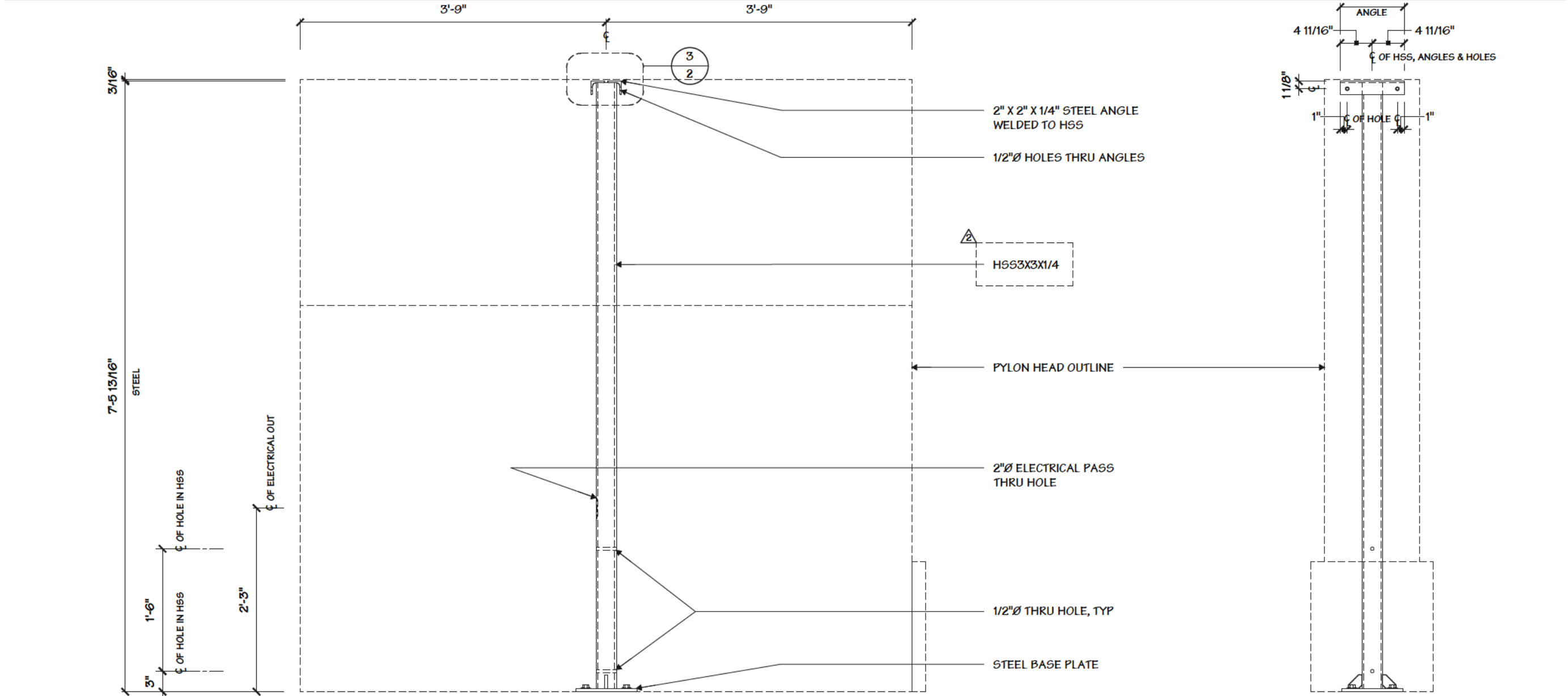
© 2022
Identity Signs
All designs represented are the sole property of identity signs, and may not be reproduced in part or whole without written permission from Identity Signs.

Sales Person
Brent Albers

Project Manager
Kara Lopez

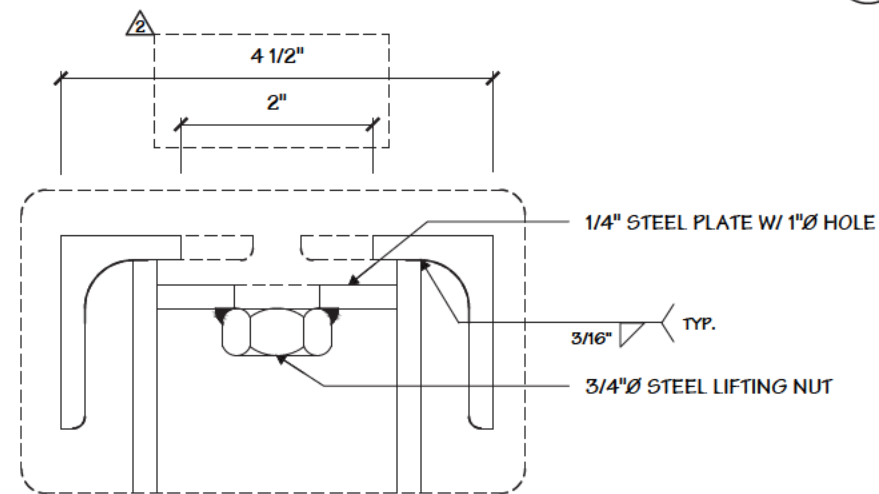
Designer
Punga Vea

MOUNTING DETAIL 9 3/8"



1 STEEL ELEVATION
2 3/4" = 1' - 0"

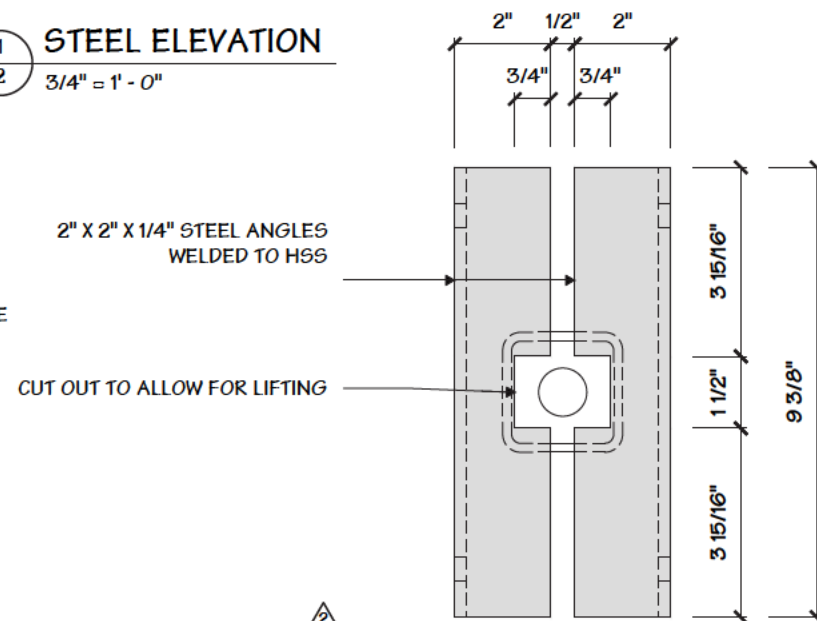
2 SIDE VIEW
2 $\frac{3}{4}'' = 1' - 0''$



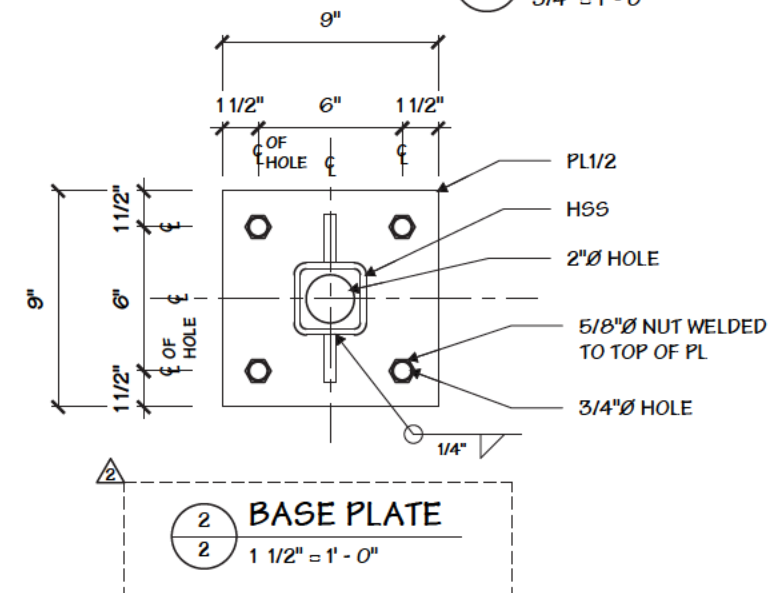
3
2

DETAIL VIEW @ LIFTING NUT

6" = 1' - 0"



4 TOP VIEW @ ANGLES
2 3" = 1" - 0"



2 BASE PLATE
2 1 1/2" = 1' - 0"



Salt Lake, UT | Seattle, WA
801.748.4750
sales@idsignco.com

Job # 48057

Client
Griffin Fast Lube Management

Address
1783 W 2700 N
Farr West, UT 84404

Zone
Commercial

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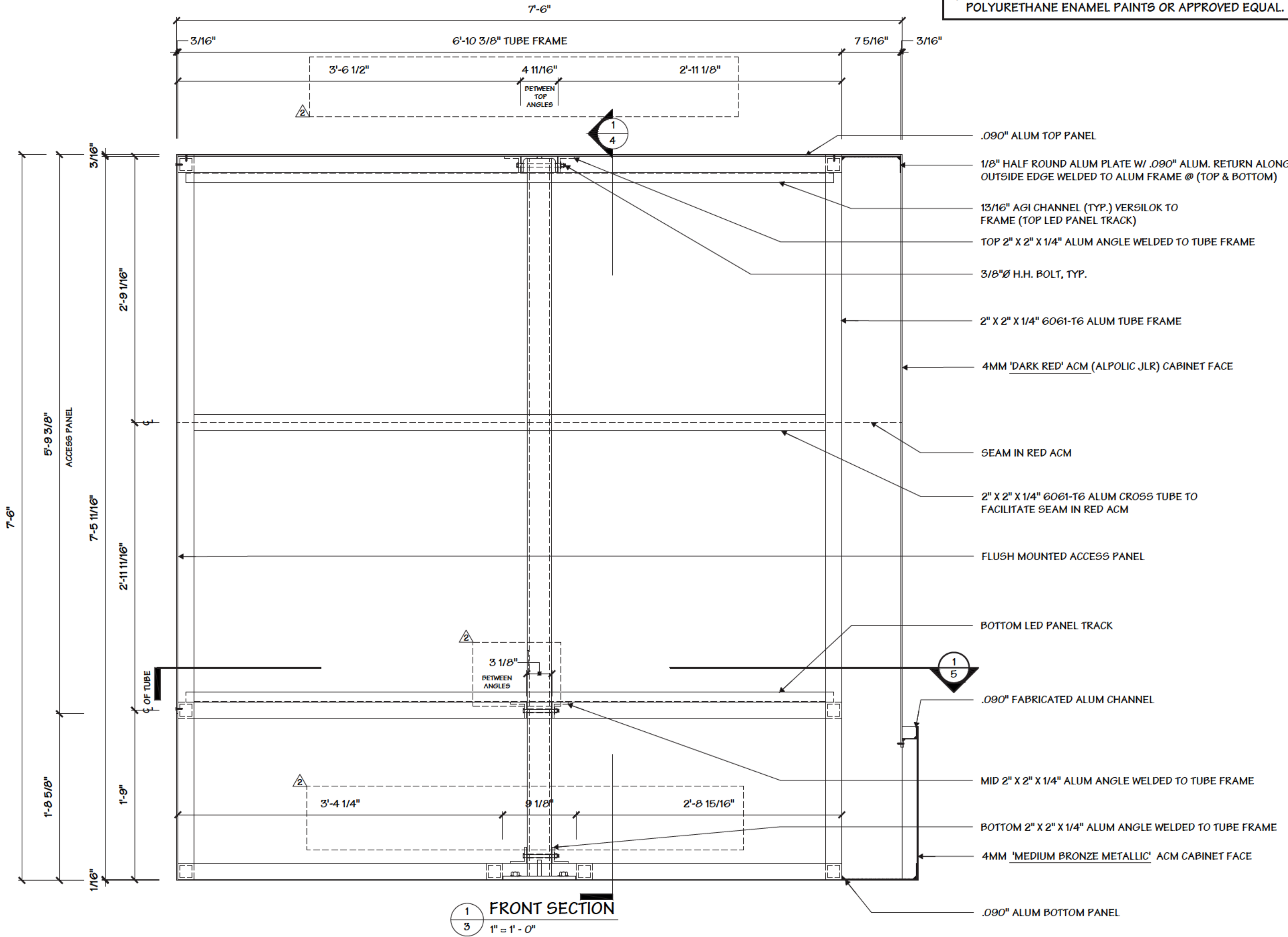
Sales Person
Brent Albers

Project Manager
Kara Lopez

Designer
Punga Ve'a

MOUNTING DETAIL

- NOTES:
- 1) SIGN INTERIOR & HSS TO BE PAINTED GLOSS WHITE.
 - 2) ALUM. PANELS ARE TO BE PAINTED WITH MATTHEWS POLYURETHANE ENAMEL PAINTS OR APPROVED EQUAL.



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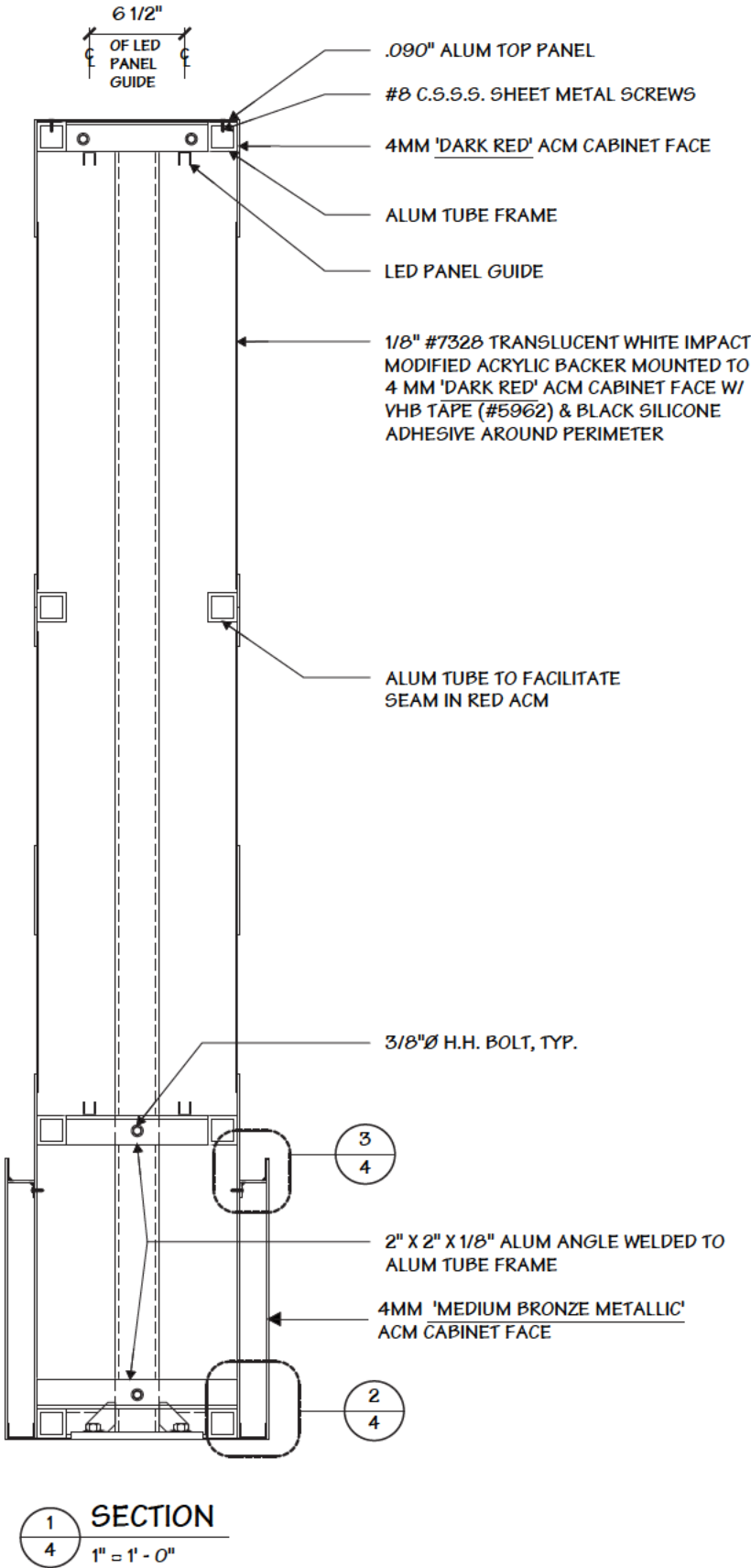
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Sales Person
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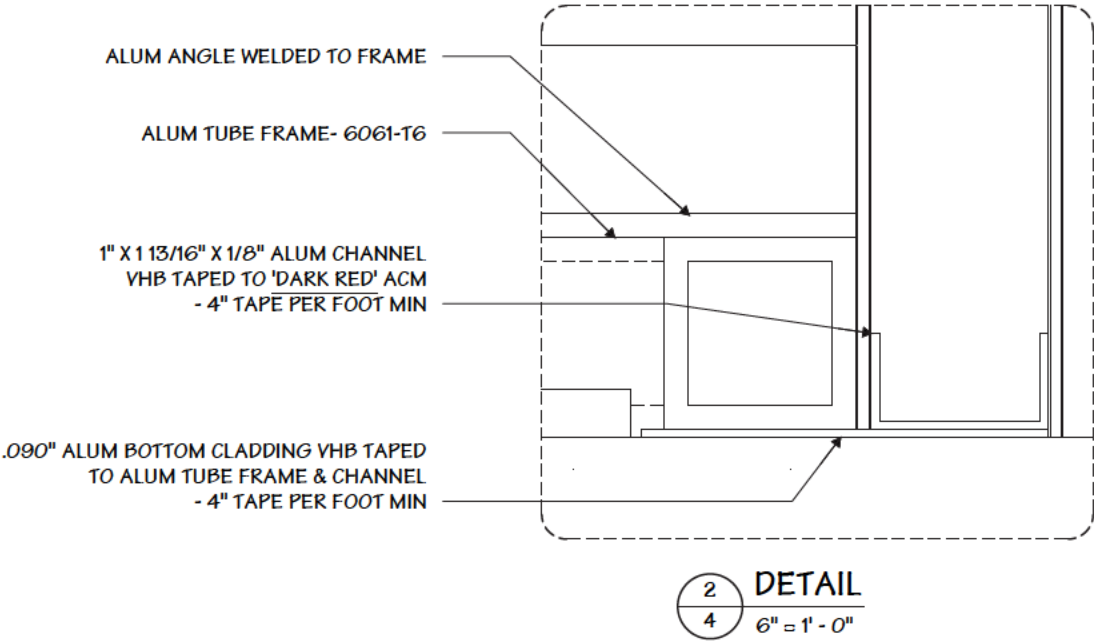
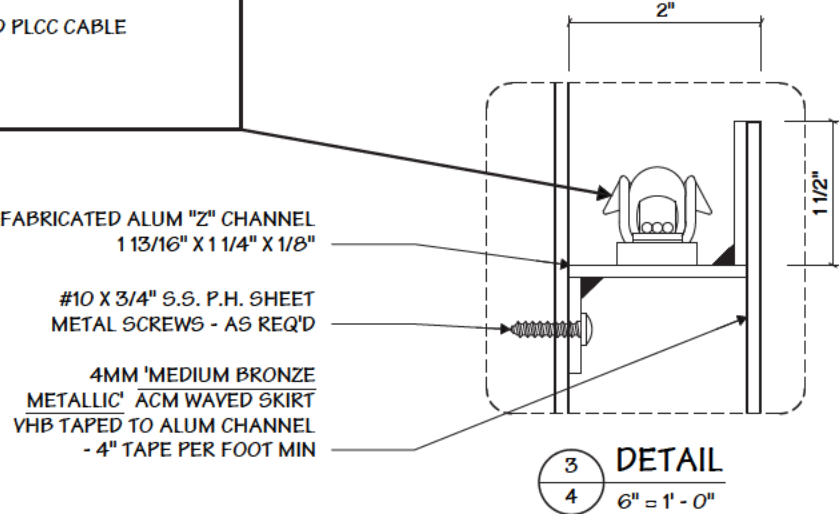
Project Manager
Kara Lopez

Designer
Punga Vea

MOUNTING DETAIL



SLOAN FLEXIBLE RED LED MOUNTED TO 2" ALUM. REVEAL
- AS REQ'D
PART #s:
1) SLO #701499-R-10
2) SLO #701507MOD POWER SUPPLY
3) SLO #400299-100 BELDEN JACKETED PLCC CABLE
4) SLO #701572-25 MOUNTING CLIPS
5) SLO #701491-FB JOINT KIT
6) SLO #701386-25 BUTT SPLICES



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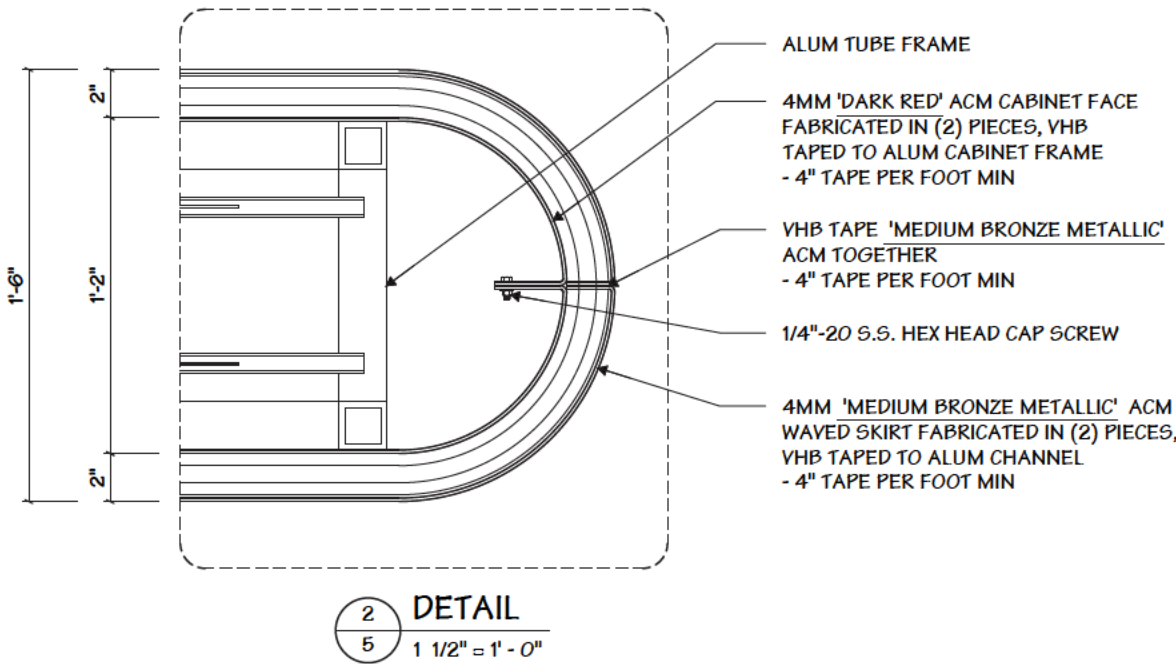
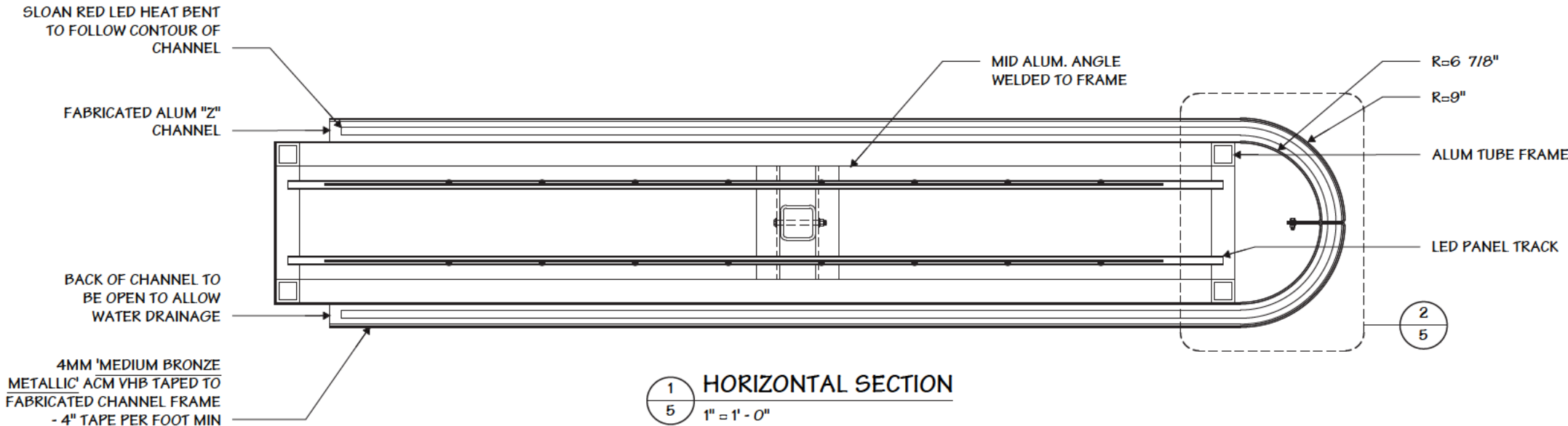
Sales Person
Brent Albers

Project Manager
Kara Lopez

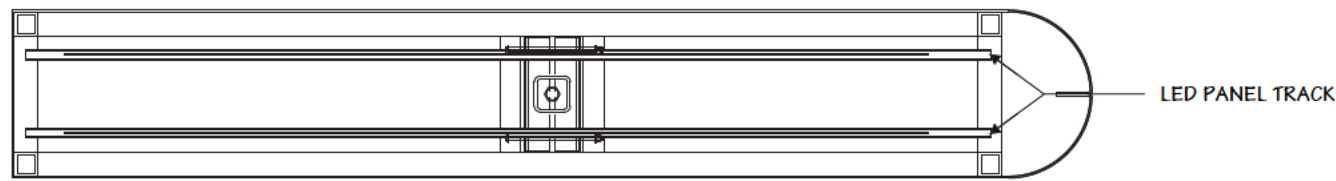
Designer
Punga Vea

NOTES:

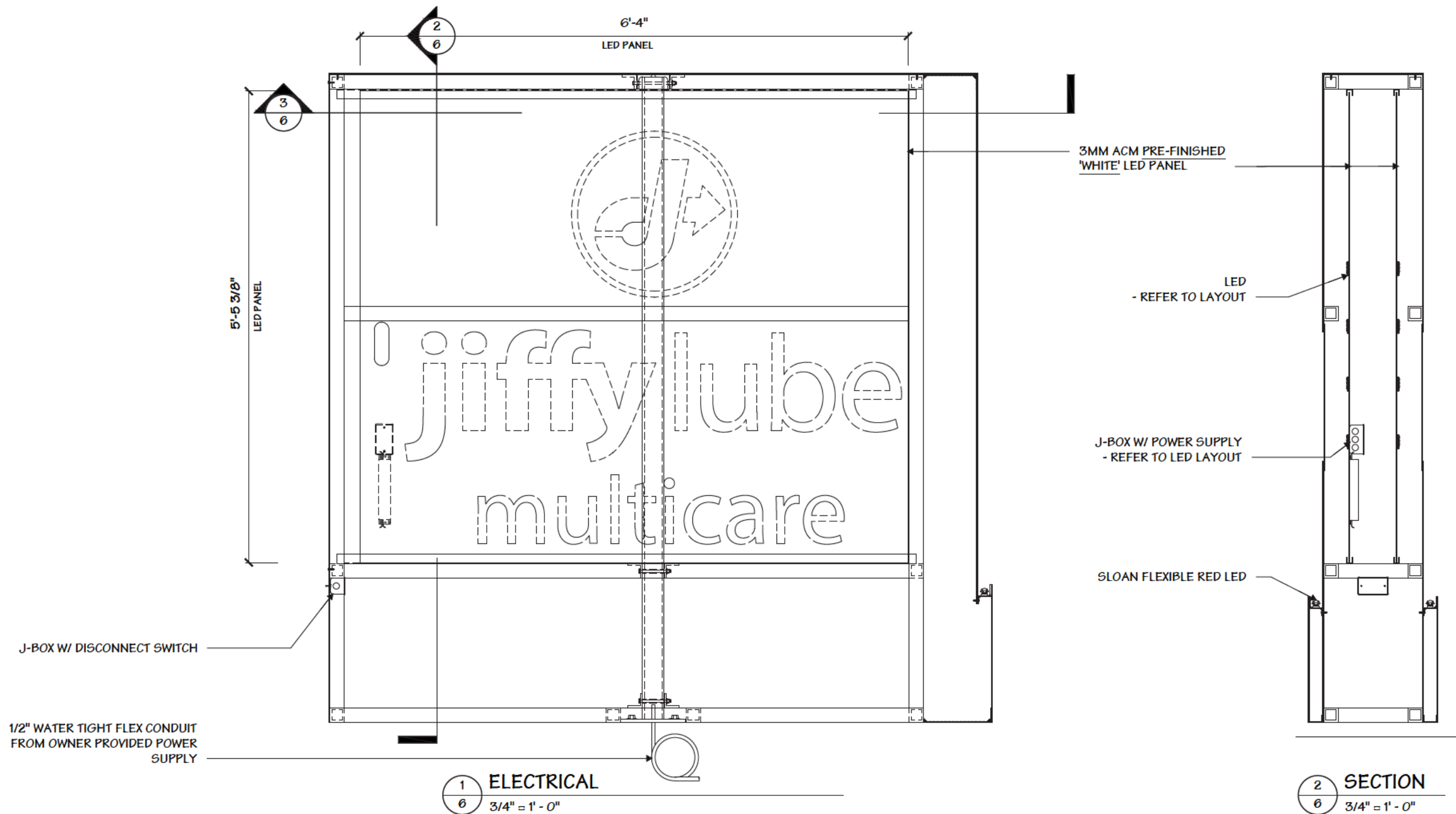
1) ATTACHMENT OF ALL ACM TO THE ALUM. FRAME IS VIA VHB TAPE.



MOUNTING DETAIL



3 SECTION
6 3/4" = 1' - 0"



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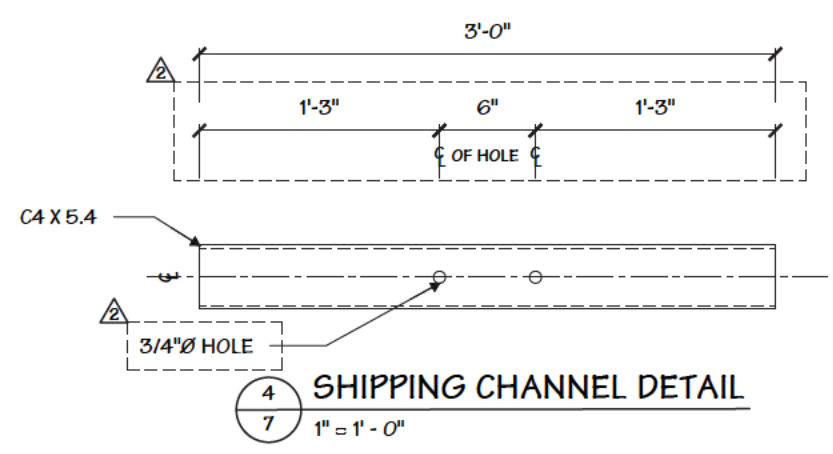
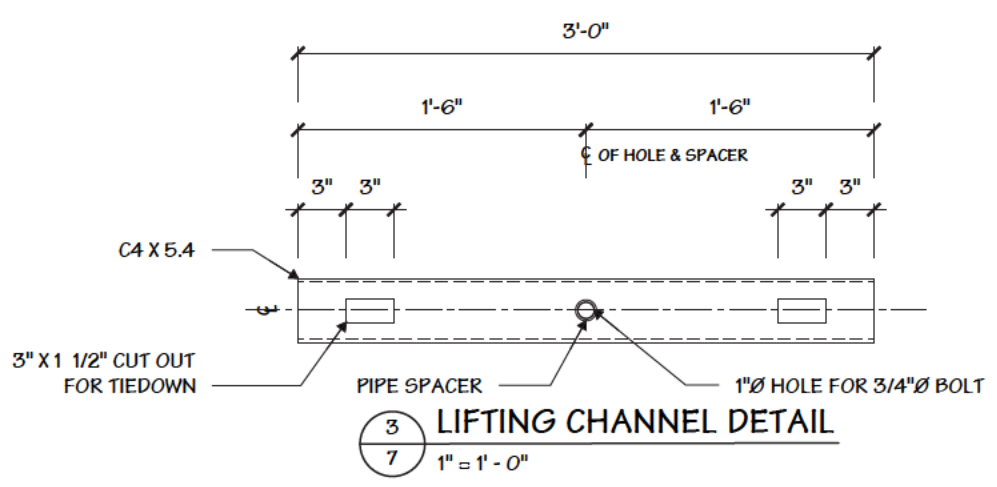
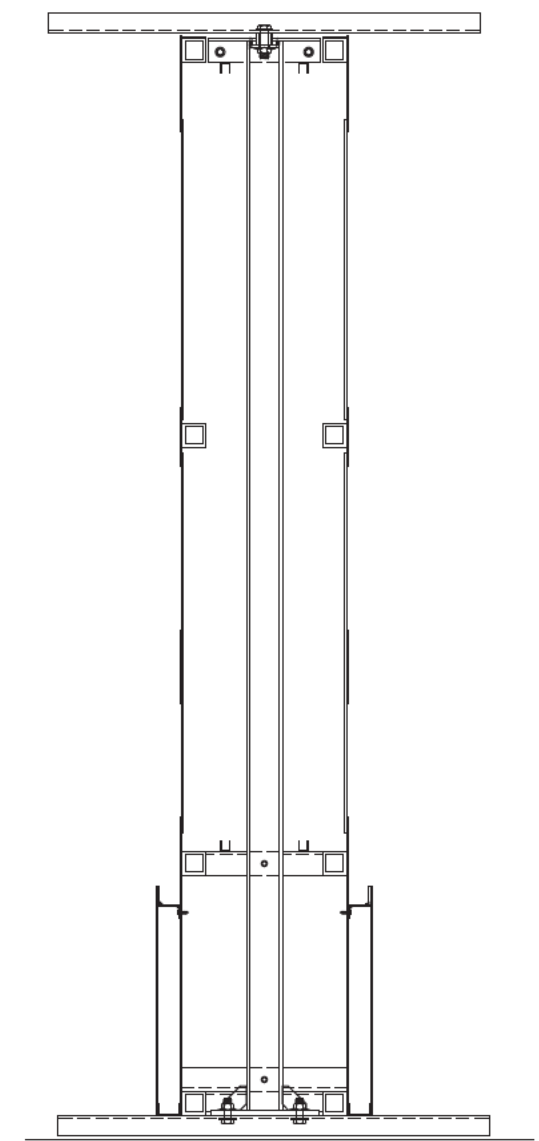
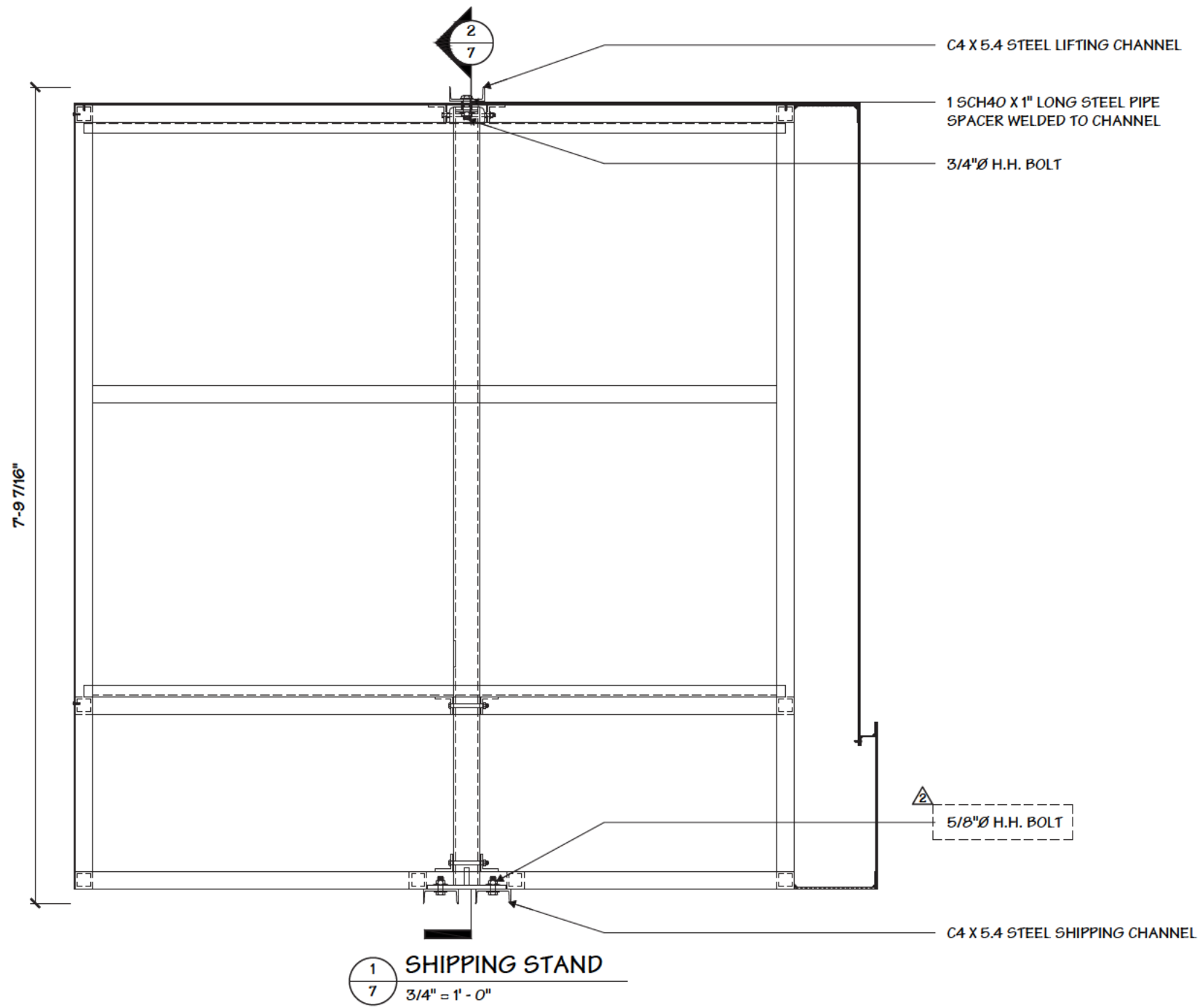
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MOUNTING DETAIL



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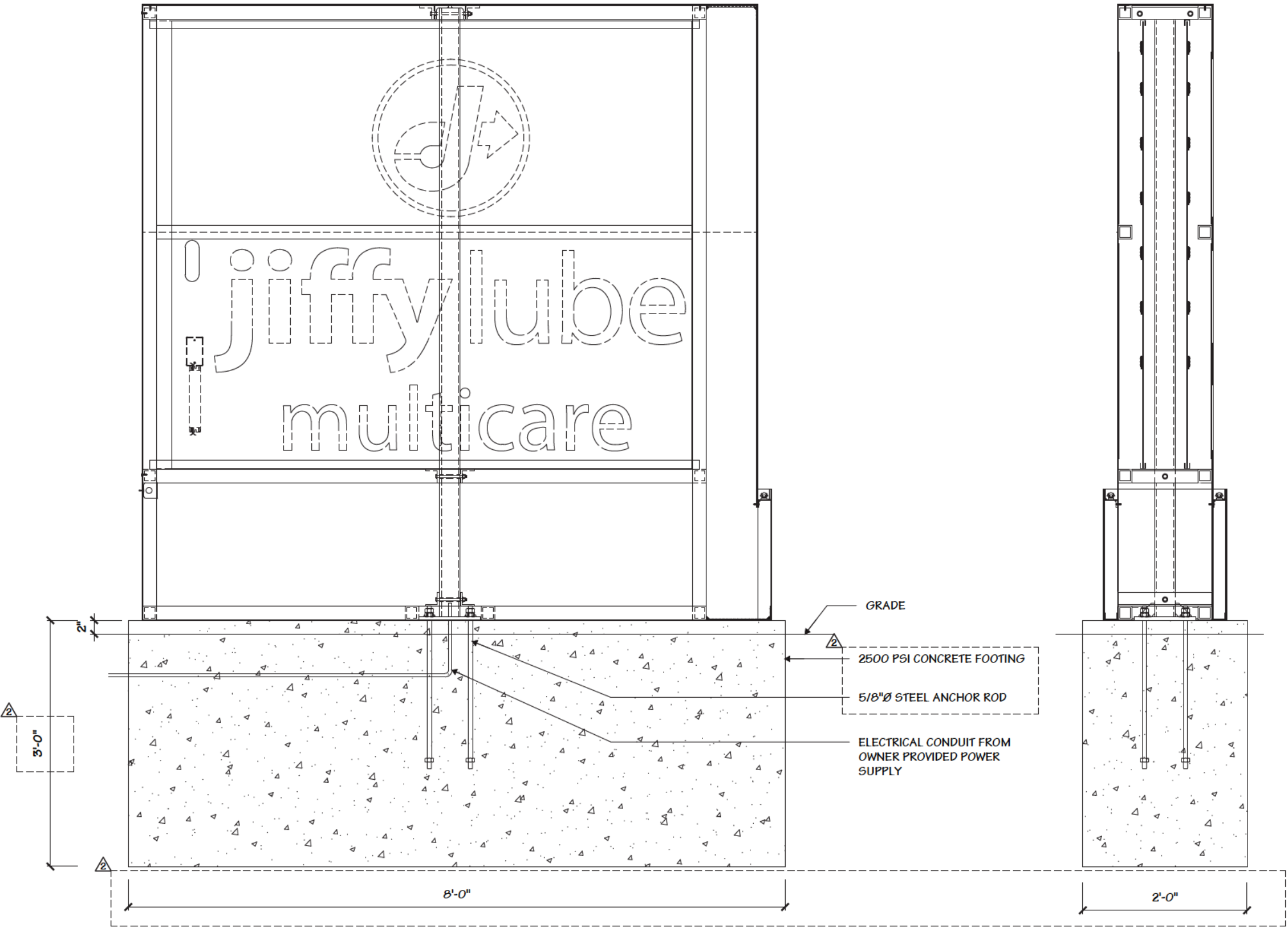
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FOUNDATION DETAIL



1 FOUNDATION
8 3/4" = 1' - 0"

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LED DETAIL



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ECONO WASTE, INC.

P.O. BOX 106

ROY, UT 84067

PHONE: (801)627-2680 EMAIL: econowaste@hotmail.com



October 28, 2022

Farr West City
1896 N 1800 W
Farr West, UT 84404

RE: Request for Annual Increase - Consumer Price Index

Dear Mayor and City Council,

As stated in our agreement with Farr West City we would like to request a price increase according to the consumer price index (CPI-U). For this last year the CPI increased 8.2 percent. The increase would be .33 cents each month per container which includes trash and recycling.

Current rates:

Trash containers - \$4.00 per month

Recycling Containers - \$4.00 per month

New Rates:

Trash containers - \$4.33 per month

Recycling containers - \$4.33 per month

With our costs rising and the unforeseen future we ask that you consider the above and please get back with me at your earliest convenience. We appreciate your understanding, and thank you for supporting your locally owned and operated waste hauler.

Sincerely,

Val Sanders
Econo Waste, Inc.

Application for Residential Business License



Application date: _____

Owner Name: Robert Brian

Owner Address: 3844 N 2525 W City: Farr West State: Ut Zip: 84404

Telephone: 801-540-8751 Fax: _____ Email: bobbybrian90@gmail.com

Business Name: RBR Rentals DBA: _____

State Sales Tax ID # 15583644-002-STC State License # 12957288 -0160

If a daycare of preschool, number of own children: _____; number of other children: _____

Describe your type of business in detail: I will be renting out a
dump trailer.

Businesses that require Health Department inspection and permit: ANY business that is selling food, day cares, nursing and assisted livings.

Health Department Permit # _____ or check if not applicable _____

Please initial each box acknowledging you understand and comply with the ordinance requirements (Farr West City Ordinance, Chapter 5.16)

☒ Only persons who are bona fide residents of the premises shall be engaged in the business or occupation.

☒ The business shall not physically change or alter the exterior of the dwelling.

☒ No business signs or advertising will be on the premises.

☒ The business will not cause an increase in vehicular traffic.

☒ The business will not require additional off street parking beyond that normally required for residential uses.

☒ The business will meet all applicable safety, fire, building and health codes.

☒ The business will not produce noise, dust, odors, noxious fumes glare or other hazards to safety and health which are emitted from and may be discernible beyond the premises. Residential businesses may not create a public nuisance as defined by State law or this code.

RB The business will not create a hazard by using flammable, explosive or other dangerous materials or by keeping or raising animals which are capable of inflicting harm or discomfort or endangering the health and safety of any person or property.

RB Any nursery or daycare use of the dwelling shall comply with state laws governing such use.

RB If the business is conducted within the living quarters of the home, it will not occupy more than 25% of the main floor area, or more than 400 square feet of the home. If conducted within the garage, it shall not occupy more than 33% of the garage area. *Businesses in accessory building may use the whole structure for business use.

Residential Business License Fee

\$30.00

***Residential businesses conducted entirely within the primary residence are not subject to the \$30.00 fee.**

Is this business conducted entirely within the primary residence? No

If no, is it conducted in a garage and/or accessory building? yes

I, the applicant, am aware of and conform to all State and Federal Regulations. I have read and understand the Codes and Ordinances of Farr west City for Business License Regulations (Title 5).

Applicant signature: [Signature] Date: 03/10/22

For office use only:

Amount paid: 15- Date paid: 10/3/22 Receipt Number: 9.002168
City Council Date: 10/20/22 Approved: _____ Disapproved: _____
License number: _____ Date issued: _____