Permit Fees:	Paid Fees: (Check#/Cash)	*/Cash) Date Paid:	
FOR USE BY TOWN: Date Received:	Permit #:	Use Zo	one.
Nekiya Milla	u		1.0.02
Signature of Owner or Authorized Representative:			Date: 11/11/24
Authorized Representative if o Nekiya Miller			
Mailing Address: 1580 Pioneer Ro	ad Salt Lake City UT 84104		
Mechanical Contractor: Holbrook Service		Phone: 801-599-6285	
Mailing Address:			
Plumbing Contractor:		Phone:	
Mailing Address:			
Electrical Contractor:		Phone:	
Mailing Address:			
ontractor:		Phone:	
Mailing Address:			
Owner:		Phone:	
A set it is a second of the se	CTOR/CONSULTANTS:		
Description (Intent of Permit) We will be do	: ing a Like for Like replacement on two	rooftop uni	its
Estimated Valuation of Work: \$9,790.00	A A STATE OF THE A ST		
Legal Description (Lot # and s Family Do	Subdivision): ıllar #28435		
Physical Address: 109 Grey	s River Drive Alpine WY		
PROJECT NAME:			