

DATE SUBMITTED: 8-6-85

PERMIT # 23760

FEE 5.00

PLANNING CLEARANCE

GRAND JUNCTION PLANNING DEPARTMENT

BLDG ADDRESS: 2670 Patterson Rd.

SQ. FT. OF BLDG: 384

SUBDIVISION: Viewpoint Drive

SQ. FT. OF LOT: _____

FILING # _____ BLK # _____ LOT # _____

NUMBER OF FAMILY UNITS: Single

TAX SCHEDULE NUMBER:

NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:

2945-024-00-045

1

PROPERTY OWNER: Robert L. Alstatt

USE OF ALL EXISTING BUILDINGS:

ADDRESS: 2670 Patterson Rd., G.J.

Residential

PHONE: 242-7556

DESCRIPTION OF WORK AND INTENDED USE:

SUBMITTALS REQ'D: TWO (2) PLOT PLANS SHOWING PARKING, LANDSCAPING, SETBACKS TO ALL PROPERTY LINES, AND ALL STREETS WHICH ABUT THE PARCEL.

Build garage

FOR OFFICE USE ONLY

ZONE: RSF4

FLOODPLAIN: YES _____ NO X

SETBACKS: F 20/0 S 3 R 10

GEOLOGIC HAZARD: YES _____ NO X

MAXIMUM HEIGHT: _____

CENSUS TRACT #: 10

PARKING SPACES REQ'D: _____

TRAFFIC ZONE: 23

LANDSCAPING/SCREENING: _____

SPECIAL CONDITIONS: _____

ANY MODIFICATION TO THIS APPROVED PLANNING CLEARANCE MUST BE APPROVED, IN WRITING, BY THE DEPARTMENT. THE STRUCTURE APPROVED BY THIS APPLICATION CANNOT BE OCCUPIED UNTIL A CERTIFICATE OF OCCUPANCY (C.O.) IS ISSUED BY THE BUILDING DEPARTMENT (SECTION 307, UNIFORM BUILDING CODE.)

ANY LANDSCAPING REQUIRED BY THIS PERMIT SHALL BE MAINTAINED IN AN ACCEPTABLE AN HEALTHY CONDITION. THE REPLACEMENT OF ANY VEGETATION MATERIALS THAT DIE OR ARE IN AN UNHEALTHY CONDITION SHALL BE REQUIRED.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THE ABOVE IS CORRECT AND I AGREE TO COMPLY WITH THE REQUIREMENTS ABOVE. FAILURE TO COMPLY SHALL RESULT IN LEGAL ACTION.

DATE APPROVED: 8/6/85

APPROVED BY: [Signature]

Robert L. Alstatt
SIGNATURE

APPLICATION FOR BUILDING PERMIT
BUILDING DEPARTMENT

CITY X
COUNTY _____

Permit No _____
DATE 8-6-85

TO BE FILLED OUT BY APPLICANT

PLOT PLAN

VALUATION _____

NOTE: Show Easements, Property Line Dimensions, All Other Structures, Specify North, and Street Name. For Odd Shaped Lots, Provide Separate Plot Plan.

LEGAL DESCRIP.	BLDG ADDRESS <u>2620 Patterson Rd., G.S.</u>
	SUBDIVISION <u>View point</u>
	FILING NO _____ LOT NO _____ BLK NO _____
	TAX SCHEDULE NO <u>2945-024-60-045</u>
OWNER	NAME <u>Robert L. Alstatt</u>
	MAIL ADDRESS <u>Same</u>
	CITY <u>Same</u> PHONE <u>242-7556</u>
ARCH ENGINEER	NAME _____
	MAIL ADDRESS _____
	CITY _____
CONTRACTOR	NAME _____
	ADDRESS _____
	CITY _____
	LICENSE NO _____ PHONE _____

CLASS OF WORK

REMODEL ADDITION _____
 REPAIR _____ MOVE-ON _____ OTHER _____
 Sq Ft of Bldg _____ Sq Ft of Lot _____
 No of Floors _____ Height _____
 No of Family Units _____ No of Bedrooms _____

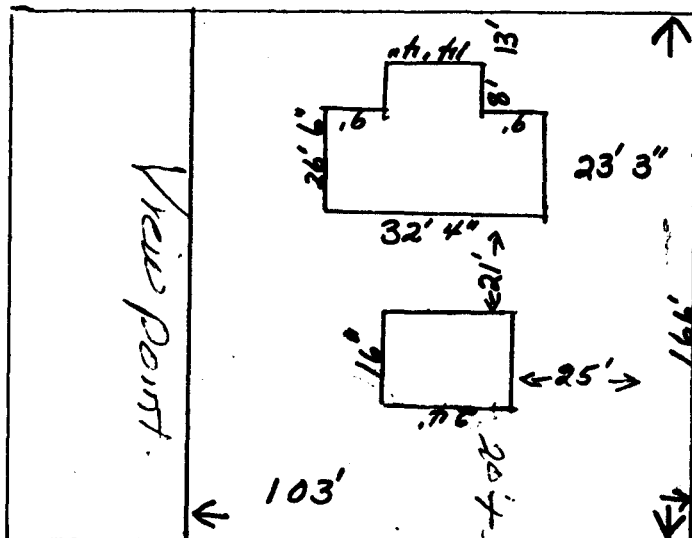
Occupancy:
 Residence _____
 Mobile Home _____
 (HUD No.) _____
 Commercial _____
 Other _____

GARAGE: Single Dble _____ CARPORT: Single _____ Dble
 FIREPLACE _____ WOODSTOVE _____

Are Building Materials to be purchased outside Mesa County? Yes _____ No
 State Sales Tax # _____

DOCUMENTS REQUIRED

Radon Survey (248-7164) _____
 Building Plans _____
 Sanitary Sewer Clearance _____
 On-Site Sewage Disposal Permit _____
 Fire Flow Survey _____
 Planning _____
 Energy _____
 Food Handling - County Health Dept. _____
 Other _____



SHOW ALL SETBACKS FROM PROPERTY LINES

Description of Work Planned: _____

I hereby acknowledge that I have read this application and the above is correct and I agree to comply with all city and county ordinances and state laws regulating building construction.

NOTE TO APPLICANT: Reverse side of this form must be completed.

Robert L. Alstatt
SIGNATURE

FOR OFFICE USE ONLY

Approval Date _____ Bldg Dept By _____
 Special Conditions _____