FEE \$ 5.00

PLANNING CLEARANCE

BLDG PERMIT NO. 49407

(Goldenrod: Utility Accounting)

30-0010-10-4

(White: Planning)

(Yellow: Customer)

(Single Family Residential and Accessory Structures)

Grand Junction Community Development Department

F THIS SECTION TO BE COMPLETED BY APPLICANT ®

BLDG ADDRESS 1630 M. 197h St.	TAX SCHEDULE NO. <u>3945-134-14-003</u>
SUBDIVISION Del Mar Park	SQ. FT. OF PROPOSED BLDG(S)/ADDITION 400
FILING BLK LOT	SQ. FT. OF EXISTING BLDG(S) 600
(1) OWNER Maami Gunnblard (1) ADDRESS 1630 N. 1972 St	NO. OF DWELLING UNITS BEFORE: _ / _ THIS CONSTRUCTION
(1) TELEPHONE 245-0249	NO. OF BLDGS ON PARCEL BEFORE: AFTER: THIS CONSTRUCTION
(2) APPLICANT <u>Same</u>	USE OF EXISTING BLDGS Living
(2) ADDRESS	DESCRIPTION OF WORK AND INTENDED USE:
(2) TELEPHONE	Addition-Living
REQUIRED: Two (2) plot plans, on 8 1/2" x 11" paper, showing all existing and proposed structure location(s), parking, setbacks to all property lines, ingress/egress to the property, and all easements and rights-of-way which abut the parcel.	
THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF	
ZONE RSF-8	Maximum coverage of lot by structures357è
SETBACKS: Front 20 from property line (PL)	or Parking Reg'mt
from center of ROW, whichever is greater	Special Conditions
Side 5 from PL Rear 15' from F	PL
Maximum Height	census tract $\sqrt{}$ traffic zone $3/$
Modifications to this Planning Clearance must be approved, in writing, by the Director of the Community Development Department. The structure authorized by this application cannot be occupied until a final inspection has been completed and a Certificate of Occupancy has been issued by the Building Department (Section 305, Uniform Building Code).	
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily be limited to non-use of the building(s).	
Applicant Signature / Comile on	Date 7-27-94
Department Approval Marcia Fully	Date 7-37-94
Additional water and/or sewer tap fee(s) are required: YES NO X W/O No N /A	
Additional water and/or sewer tap fee(s) are required	I: YES NO 1 W/O No. 1 1 /4
1 W . I/ I/	
Utility Accounting Milly Torule	Date 7-27-94

(Pink: Building Department)

