

FEE \$ 5.00

BLDG PERMIT NO. 49610

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Grand Junction Community Development Department

THIS SECTION TO BE COMPLETED BY APPLICANT

1550
 BLDG ADDRESS 1550 Hwy 6 #50 TAX SCHEDULE NO. 2945-283-14-019
 SUBDIVISION Grand View Addition to GM Hts SQ. FT. OF PROPOSED BLDG(S)/ADDITION _____
 FILING _____ BLK SPICE 2 SQ. FT. OF EXISTING BLDG(S) _____
 (1) OWNER Marcella A McDonald NO. OF DWELLING UNITS BEFORE: _____ AFTER: _____ THIS CONSTRUCTION
 (1) ADDRESS P.O. Box 40969 Co. J.T NO. OF BLDGS ON PARCEL BEFORE: _____ AFTER: _____ THIS CONSTRUCTION
 (1) TELEPHONE 243-7742-243-4720 USE OF EXISTING BLDGS _____
 (2) APPLICANT _____ DESCRIPTION OF WORK AND INTENDED USE: _____
 (2) ADDRESS _____
 (2) TELEPHONE _____ place mobile home

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 PMH Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL) or _____ from center of ROW, whichever is greater Parking Req't _____
 Side _____ from PL Rear _____ from PL Special Conditions place per approved plan on existing pad.
 Maximum Height _____ CENSUS TRACT 13 TRAFFIC ZONE 80

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 Marcella A McDonald Date _____
 Department Approval Marcia Pitz Date 8-23-94

Additional water and/or sewer tap fee(s) are required: YES _____ NO X W/O No. _____

Utility Accounting Handi Stage Date 8-23-94

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2D Grand Junction Zoning & Development Code)

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)