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| FEE \$ | 10 ⁰⁰ |
| TCP \$ | — |

BLDG PERMIT NO. 58401

School Impact Fee
PLANNING CLEARANCE
 (Single Family Residential and Accessory Structures)
 Grand Junction Community Development Department

Schump

THIS SECTION TO BE COMPLETED BY APPLICANT

BLDG ADDRESS 2162 CANYON VIEW DR TAX SCHEDULE NO. 2947-351-16-001
 SUBDIVISION CANYON VIEW SQ. FT. OF PROPOSED BLDG(S)/ADDITION 2774
 FILING 3 BLK 3 LOT 1 SQ. FT. OF EXISTING BLDG(S) -0-
 (1) OWNER DAVID AND CATHY MAHOVSKY NO. OF DWELLING UNITS
 BEFORE: _____ AFTER: 1 THIS CONSTRUCTION
 (1) ADDRESS 3969 S PIAZZA LN
 (1) TELEPHONE 242-5343 NO. OF BLDGS ON PARCEL
 BEFORE: _____ AFTER: 1 THIS CONSTRUCTION
 (2) APPLICANT _____ USE OF EXISTING BLDGS SINGLE FAMILY RES
 (2) ADDRESS Same DESCRIPTION OF WORK AND INTENDED USE:
 (2) TELEPHONE _____ SINGLE FAMILY RESIDENCE

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 PR-2 Maximum coverage of lot by structures _____
 SETBACKS: Front 25' from property line (PL) Parking Req'mt _____
 or _____ from center of ROW, whichever is greater Special Conditions _____
 Side 15' from PL Rear 25' from PL by easements
 Maximum Height _____ CENSUS TRACT 1401 TRAFFIC ZONE 64

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 [Signature] Date X 11-25-96
 Department Approval [Signature] Date 11-25-96

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

Utility Accounting _____ Date _____

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

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

