

FEE \$ 10.00  
TCP \$ 0

BLDG PERMIT NO. 56202

**PLANNING CLEARANCE**  
(Single Family Residential and Accessory Structures)  
**Grand Junction Community Development Department**

5030-1070-01 THIS SECTION TO BE COMPLETED BY APPLICANT

BLDG ADDRESS 306 EAST DAKOTA DR. TAX SCHEDULE NO. 2945-302-08-010  
SUBDIVISION MONUMENT VALLEY SQ. FT. OF PROPOSED BLDG(S)/ADDITION 2,700  
FILING 5 BLK 2 LOT 10 SQ. FT. OF EXISTING BLDG(S) NONE  
(1) OWNER TOM PIPER NO. OF DWELLING UNITS  
BEFORE: 0 AFTER: 1 THIS CONSTRUCTION  
(1) ADDRESS 2256 TIFFANY DR.  
(1) TELEPHONE 243-5006 NO. OF BLDGS ON PARCEL  
BEFORE: 0 AFTER: 1 THIS CONSTRUCTION  
(2) APPLICANT WAYDE MILLANG USE OF EXISTING BLDGS \_\_\_\_\_  
(2) ADDRESS 3057 SHERIDAN CT. DESCRIPTION OF WORK AND INTENDED USE: \_\_\_\_\_  
(2) TELEPHONE 523-5352 CONSTRUCTION OF HOME S/F

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 1.6 Maximum coverage of lot by structures \_\_\_\_\_  
SETBACKS: Front 40 from property line (PL) Parking Req'mt NA  
or \_\_\_\_\_ from center of ROW, whichever is greater  
Special Conditions \_\_\_\_\_  
Side 35 from PL Rear 35 from PL  
Maximum Height \_\_\_\_\_  
CENS.T. 14 T.ZONE 69 ANN# \_\_\_\_\_

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).

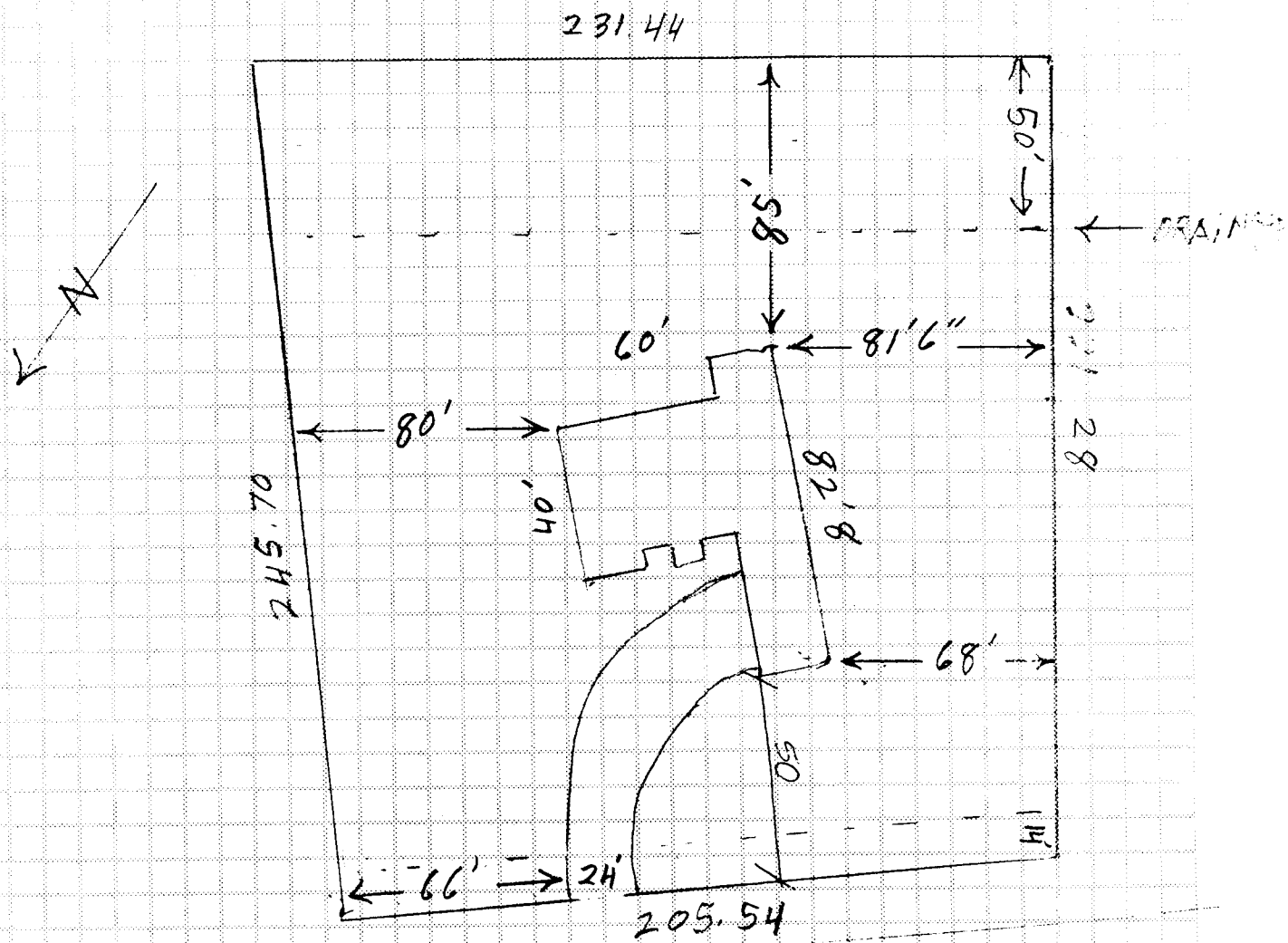
Applicant Signature Wayde Millang Date 5-17-96  
Department Approval [Signature] Date 5/22/96

Additional water and/or sewer tap fee(s) are required: YES  NO \_\_\_\_\_ W/O No. WO 9228 S/F

Utility Accounting Miller Joubert Date 5-23-96

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)



306  
 East DAKOTA DR.

DRIVEWAY PERMIT FOR INSTALLATION OF  
 A COLLECT IS REQUIRED FROM CITY  
 ENGINEERING.

J. K. Cole 5-17-96

Copy Distribution  
 White-Contractor  
 Yellow-Office File  
 Green-Inspector  
 Pink-Street Supt.

Multiple Copies: Please Type or Press Firmly With Ball Point Pen

CITY OF GRAND JUNCTION  
 250 North Fifth Street  
 Grand Junction, Colo. 81501

4343  
 Department of Public Works  
 Engineering Division  
 Phone (303) 244-1555  
 Fax (303) 244-1599

PERMIT FOR CONSTRUCTION AND INSTALLATION OF FACILITIES IN PUBLIC RIGHT OF WAY

<b>Contractor</b> Company <u>MILLANG HOME BUILDERS</u> Concrete Curbing/Sidewalk License No. <u>2960715</u> Address <u>3057 SHERIDAN CT</u> City <u>GRAND JUNCTION</u> State <u>COLO</u> Zip Code <u>81504</u> Application Date <u>5-20-96</u> Date Work to Begin <u>5-30-96</u> Anticipated Completion Date <u>6-15-96</u>		(Water Conservancy Districts Exempt) Curbing/Sidewalk Permit (\$30) \$ _____ Pavement Cut/Excavation Permit (\$50) \$ _____ Plus \$0.05 per linear foot of trench over 100' in length \$ _____ Other \$ _____ Total Permit Fees \$ <u>N.C</u>		Permit Fee \$ _____
		<b>Responsible Charge</b> Responsible Construction Supervisor: <u>WAYDE MILLANG</u> 523-5352 Phone No. Alternate Responsible Person: <u>WILLIE MILLANG</u> 523-5352 Phone No. <u>SAME</u>		
		After Working Hours Contact _____ Phone No. _____		

Street Address/Location(s) 306 E. DAKOTA DR. Job Location(s) MONUMEN VALLEY

Subdivision Name (If Known) \_\_\_\_\_

Type of Work:  1 Remove Existing  2 Repair Existing  3 Replace Existing  4 New Installation

<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Sanitary Sewer	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Irrigation	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 Driveway	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Underground Power	<input type="checkbox"/> Utility Work Is
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Storm Sewer	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Curb & Gutter	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Telephone	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Gas	<input type="checkbox"/> Main Line
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Water	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Sidewalk	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Cable T.V.	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 Other _____	<input type="checkbox"/> Service Line

Estimated Quantities

Curb, Gutter & Sidewalk _____ Lineal Feet	Sidewalk Crossing Drain _____ Each
Curb & Gutter _____ Lineal Feet	Storm Drain Inlet _____ Each
Sidewalk _____ Lineal Feet	Asphalt Pavement _____ Square Yards
Driveway Section _____ Square Yards	Concrete Pavement _____ Square Yards
Drain Pan _____ Lineal Feet	Other _____
Excavation Volume _____ Cubic Yards	Type of Backfill <u>GRAVEL</u>

<b>Requirements</b> Yes No <input type="checkbox"/> <input type="checkbox"/> Performance Guaranty <input type="checkbox"/> <input type="checkbox"/> Traffic Control Plan <input type="checkbox"/> <input type="checkbox"/> Pedestrian Safety Plan <input type="checkbox"/> <input type="checkbox"/> Inspection of Concrete Forms & Base <input type="checkbox"/> <input type="checkbox"/> Inspection of Facilities Prior to Back-Fill <input type="checkbox"/> <input type="checkbox"/> Inspection of Subgrade After Back-Fill <input checked="" type="checkbox"/> <input type="checkbox"/> Final Inspection Upon Completion of Work <input type="checkbox"/> <input type="checkbox"/> Community Development Department Approval * <input type="checkbox"/> <input type="checkbox"/> End of day surface restoration required. (Surfacing material to be used _____)	(To Be Completed By City) <b>Testing Requirements**</b> <input type="checkbox"/> Backfill Compaction Test(s) AASHTO T-99 <input type="checkbox"/> Roadbase Compaction Test(s) AASHTO T-180 <input type="checkbox"/> Bituminous Pavement Compaction Test(s) AASHTO T-230 <input type="checkbox"/> Concrete Slump/Air Test(s) AASHTO T-119, T-152 <input type="checkbox"/> Concrete Compressive Strength AASHTO T-22, T-23 <input type="checkbox"/> Other <u>18" pipe dia</u>
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\* Community Development Department approval required for new or changed access to all streets except residential.  
 \*\* All compliance testing shall be performed by a qualified independent laboratory. Frequency of testing shall be in accordance with city specifications.

In accepting this permit the undersigned, representing the Permittee, verifies that he has read and understands all the provisions and requirements of this permit; that he has authority to sign for and bind the Permittee; and by virtue of his signature the Permittee is bound by and agrees to comply with all City ordinances, standards and specifications regulating construction.

Contractor Wayde Millang

Permit Valid For 6 Months From Date Issued

Preconstruction Inspection by: _____	Date _____
Public Works Permit Approval by: <u>AWA</u>	Date <u>5-21-96</u>
Community Development Approval by: _____	Date _____
Final Inspection by: _____	Date _____

