

FEE \$	0
TCP \$	0
SIF \$	0



BLDG PERMIT NO. 07277

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

20118-12878

BLDG ADDRESS 303 Acoma Dr TAX SCHEDULE NO. 2945-244-33-009
 SUBDIVISION HELENA SQ. FT. OF PROPOSED BLDG(S)/ADDITION 20 x 24
 FILING --- BLK 1 LOT 9 SQ. FT. OF EXISTING BLDG(S) _____
 (1) OWNER HENRY W. DITZES JR NO. OF DWELLING UNITS
 BEFORE: 1 AFTER: 1 THIS CONSTRUCTION
 (1) ADDRESS 303 Acoma Dr NO. OF BLDGS ON PARCEL
 BEFORE: 1 AFTER: 1 THIS CONSTRUCTION
 (1) TELEPHONE 970-256-9737 USE OF EXISTING BLDGS HOME
 (2) APPLICANT SAME DESCRIPTION OF WORK AND INTENDED USE: CONCREAT
 (2) ADDRESS _____ SLAB FOR EVENTUAL GARAGE
 (2) TELEPHONE _____

REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all existing & proposed structure location(s), parking, setbacks to all property lines, ingress/egress to the property, driveway location & width & all easements & 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 structures 45%
 SETBACKS: Front 20' from property line (PL) Parking Req'mt 2
 or 45' from center of ROW, whichever is greater Special Conditions Concrete slab
 Side 5' from PL Rear 15' from PL foundation only for future struct.
 Maximum Height 32' CENSUS 13 TRAFFIC 80 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 Henry Ditzes Date Oct 3, 1997
 Department Approval Quincy Castello Date 10-3-97

Additional water and/or sewer tap fee(s) are required: YES _____ NO W/O No. No chg in S/F use
 Utility Accounting CM Cole Date 10/3/97

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)

for future structure

