

FEE \$	10.00
TCP \$	0
SIF \$	0



BLDG PERMIT NO. 60195

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

BLDG ADDRESS 2670 Catalina Dr TAX SCHEDULE NO. 2701-264-19-017

SUBDIVISION Paradise Hills SQ. FT. OF PROPOSED BLDG(S)/ADDITION 240

FILING 5 BLK 20 LOT 13 SQ. FT. OF EXISTING BLDG(S) 1450 app.

(1) OWNER Arlylys Indergard NO. OF DWELLING UNITS
BEFORE: 1 AFTER: 1 THIS CONSTRUCTION

(1) ADDRESS 2670 Catalina Dr NO. OF BLDGS ON PARCEL
BEFORE: 1 AFTER: 1 THIS CONSTRUCTION

(1) TELEPHONE 970-242-0797

(2) APPLICANT Arlylys Indergard USE OF EXISTING BLDGS RESIDENTS

(2) ADDRESS _____ DESCRIPTION OF WORK AND INTENDED USE: add

(2) TELEPHONE 970-242-0797 Screened in Porch

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-4 Maximum coverage of lot by structures 3570

SETBACKS: Front 20' from property line (PL) Parking Req'mt 2
or 45' from center of ROW, whichever is greater

Side 7' from PL Rear 30' from PL Special Conditions _____

Maximum Height 32'

CENSUS 16 TRAFFIC 13 ANNEX# _____

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 Arlylys Indergard Date 5/1/97

Department Approval Leuta J. Castello Date 5/1/97

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

Utility Accounting Dottie Hobbes Date 5-1-97

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)

