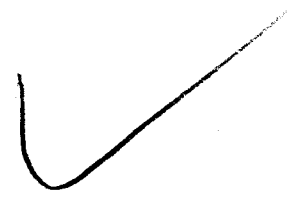


FEE \$	10-
TCP \$	-0-
SIF \$	-0-



BLDG PERMIT NO. 61174

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



BLDG ADDRESS 2464 Cimarron Dr. TAX SCHEDULE NO. 2701-334-19-002

SUBDIVISION North Valley Sub Div. SQ. FT. OF PROPOSED BLDG(S)/ADDITION Concur for Patio

FILING 1 BLK 3 LOT 2 SQ. FT. OF EXISTING BLDG(S) 1773

(1) OWNER Herbert O. Miracle NO. OF DWELLING UNITS BEFORE: Same AFTER: _____ THIS CONSTRUCTION

(1) ADDRESS 2464 Cimarron Dr.

(1) TELEPHONE 970-248-9844 NO. OF BLDGS ON PARCEL BEFORE: Same AFTER: _____ THIS CONSTRUCTION

(2) APPLICANT Herbert O. Miracle USE OF EXISTING BLDGS Concur for Patio

(2) ADDRESS 2464 Cimarron Dr. DESCRIPTION OF WORK AND INTENDED USE: Patio

(2) TELEPHONE 248-9844

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 PR-4.1 Maximum coverage of lot by structures _____

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

Side 15' from PL Rear 5' from PL Special Conditions _____

Maximum Height _____

CENSUS 16 TRAFFIC 12 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 Clara L. Miracle Date 7-14-97

Department Approval Marcia Rabideaux Date 7-14-97

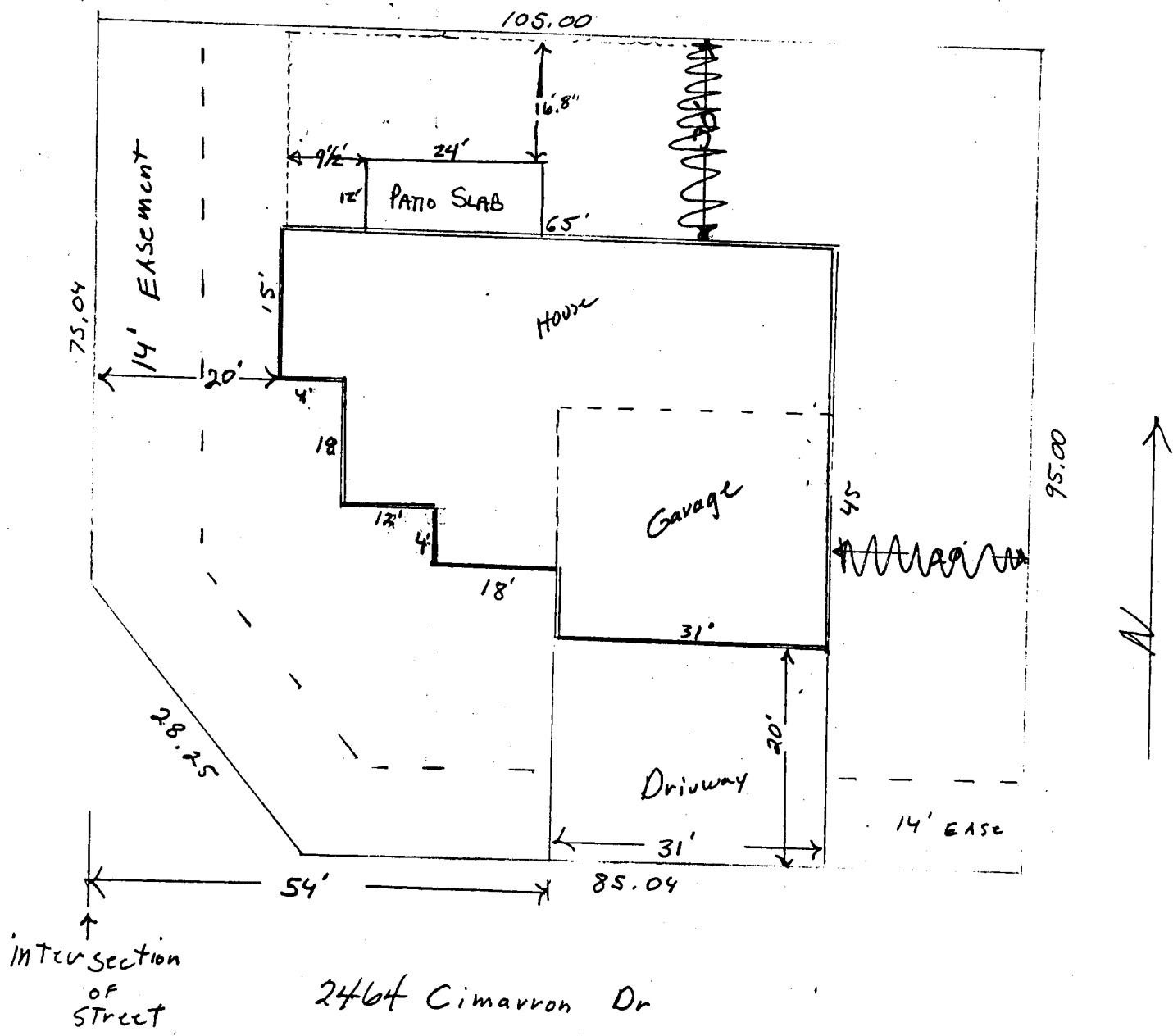
Additional water and/or sewer tap fee(s) are required: YES _____ NO W/O No. _____

Utility Accounting O. Adams Date 7-14-97

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)

Monument View Dr



ACCEPTED MR 7-14-97
ANY CHANGE OF SETBACKS MUST BE
APPROVED BY THE CITY PLANNING
DEPT. IT IS THE APPLICANT'S
RESPONSIBILITY TO PROPERLY
LOCATE AND IDENTIFY EASEMENTS
AND PROPERTY LINES.