

FEE \$	10.00
TCP \$	_____
SIF \$	_____



BLDG PERMIT NO. 60039

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



BLDG ADDRESS 2322 Hwy 6+50 TAX SCHEDULE NO. 2945-052-00-067
 SUBDIVISION Mobile City MHP SQ. FT. OF PROPOSED BLDG(S)/ADDITION 16 x 80
 FILING _____ BLK _____ LOT 39 SQ. FT. OF EXISTING BLDG(S) _____
 (1) OWNER Colleen O'Donnell NO. OF DWELLING UNITS
 BEFORE: 0 AFTER: 1 THIS CONSTRUCTION
 (1) ADDRESS 2322 Hwy 6+50 #39
 (1) TELEPHONE 242-9199 NO. OF BLDGS ON PARCEL
 BEFORE: 1 AFTER: 2 THIS CONSTRUCTION
 (2) APPLICANT _____ USE OF EXISTING BLDGS Storage shed
 (2) ADDRESS _____ DESCRIPTION OF WORK AND INTENDED USE:
 (2) TELEPHONE _____ place home.

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 H.O. Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL)
 or _____ from center of ROW, whichever is greater Parking Req'mt _____
 Side _____ from PL Rear _____ from PL Special Conditions place on lot per
plan
 Maximum Height _____ CENSUS 9 TRAFFIC 6 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 X Colleen O'Donnell Date X 4-21-97
 Department Approval Marcia Rabideaux Date 4-21-97
 ^dditional water and/or sewer tap fee(s) are required: YES _____ NO X W/O No. No chgin use
 Utility Accounting CM Marshall Date 4-21-97

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)