

FEE \$	1000
TCP \$	0
SIF \$	0



BLDG PERMIT NO. 102353

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

BLDG ADDRESS 830 Independent Ave. # 36 TAX SCHEDULE NO. 2945-104-01-006
 SUBDIVISION Westlake M.H. Park SQ. FT. OF PROPOSED BLDG(S)/ADDITION 728
 FILING _____ BLK _____ LOT 36 SQ. FT. OF EXISTING BLDG(S) N/A
 (1) OWNER Steve Peterson / Rachel Condon NO. OF DWELLING UNITS
 BEFORE: 0 AFTER: 1 THIS CONSTRUCTION
 (1) ADDRESS 2915 Orchard # B. 33
 (1) TELEPHONE 243-1128 NO. OF BLDGS ON PARCEL
 BEFORE: _____ AFTER: _____ THIS CONSTRUCTION
 (2) APPLICANT Jared Stone USE OF EXISTING BLDGS _____
 (2) ADDRESS 1535 White # D C.J., Co. 8501 DESCRIPTION OF WORK AND INTENDED USE: Mobile
 (2) TELEPHONE 257-0924 Home Placement

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 C-2 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 AS Per Park
 Maximum Height _____ Regs
 CENSUS 4 TRAFFIC 10 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 Jared Stone Date 9-26-97
 Department Approval Senta Castella Date 9-26-97

Additional water and/or sewer tap fee(s) are required: YES _____ NO X W/O No. _____
 Utility Accounting J. Adams Date 9-26-97

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)