FEE \$	1000	
TCP \$	8	
SIF \$	7	

(White: Planning)

(Yellow: Customer)



BLDG PERMIT NO. 60200

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG ADDRESS 830 Indiguendont	5 0		
BLDG ADDRESS 830 Indipendent	TAX SCHEDULE NO. 2945-104-0100		
SUBDIVISION LIBSTLARE MADIJE HOME	SQ. FT. OF PROPOSED BLDG(S)/ADDITION //X60		
FILINGBLKLOT	SQ. FT. OF EXISTING BLDG(S)		
(1) OWNER Paul Des Jardins	NO. OF DWELLING UNITS		
(1) ADDRESS PO BOX 646	BEFORE: AFTER: THIS CONSTRUCTION		
(1) TELEPHONE Macker Co B1641	NO. OF BLDGS ON PARCEL BEFORE: AFTER: THIS CONSTRUCTION		
(2) APPLICANT SOV ON Home 3	USE OF EXISTING BLDGS		
(2) ADDRESS 2497 Huy 6450	DESCRIPTION OF WORK AND INTENDED USE:		
(2) TELEPHONE 2434406	Place Mobile Hone		
REQUIRED: One plot plan, on 8 ½" 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 1981			
zone <u>1-1</u>	Maximum coverage of lot by structures		
SETBACKS: Front from property line (PL)	Parking Req'mt		
or from center of ROW whichever is greater	Special Conditions		
Side from Pt Rear from P	<u></u>		
Maximum Height	CENSUS 4 TRAFFIC 10 ANNX#		
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 Company (Company) Date 2 Mouth 97			
Department Approval Stuts AMT MILE Date 5/2/97			
* dditional water and/or sewer tap fee(s) are required. YES NO W/O No			
Utility Accounting Kalamahan	Date 5-2-97		
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)			

(Pink: Building Department)

(Goldenrod: Utility Accounting)