

FEE \$	10 ⁰⁰
TCP \$	0
SIF \$	0



BLDG PERMIT NO. 02522

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

4525-4069

BLDG ADDRESS 830 Independent Ave TAX SCHEDULE NO. 2945-104-01-006
 SUBDIVISION Westlake MHP SQ. FT. OF PROPOSED BLDG(S)/ADDITION 14x70
 FILING _____ BLK _____ LOT 51 SQ. FT. OF EXISTING BLDG(S) NA
 (1) OWNER Yvonne Willis NO. OF DWELLING UNITS
 BEFORE: _____ AFTER: _____ THIS CONSTRUCTION
 (1) ADDRESS 830 Independent Ave #51
 NO. OF BLDGS ON PARCEL
 BEFORE: _____ AFTER: _____ THIS CONSTRUCTION
 (1) TELEPHONE _____
 (2) APPLICANT same USE OF EXISTING BLDGS NA
 (2) ADDRESS same DESCRIPTION OF WORK AND INTENDED USE: _____
 (2) TELEPHONE _____ include 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 C-2 Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL)
 or _____ from center of ROW, whichever is greater
 Side _____ from PL Rear _____ from PL
 Maximum Height _____
 Parking Req'mt _____
 Special Conditions Per Park Regs
 CENSUS 4 TRAFFIC 10 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 Yvonne Willis Date 10-21-97
 Department Approval Debra Castello Date 10-21-97

Additional water and/or sewer tap fee(s) are required: YES _____ NO W/O No. _____
 Utility Accounting at hand Date 10-21-97

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)