

FEE \$	10 ⁰⁰
TCP \$	0
SIF \$	0



BLDG PERMIT NO. 60647

PLANNING CLEARANCE

3021-1900-062 (Single Family Residential and Accessory Structures)
Community Development Department

BLDG ADDRESS 2694 Kimberly Drive TAX SCHEDULE NO. 2701-354-28-003
 SUBDIVISION Bella Vista Sub, 1st Add. SQ. FT. OF PROPOSED BLDG(S)/ADDITION 200
 FILING _____ BLK 2 LOT 5 SQ. FT. OF EXISTING BLDG(S) 2100
 (1) OWNER Kevin & Valerie Brooks NO. OF DWELLING UNITS
 BEFORE: _____ AFTER: _____ THIS CONSTRUCTION
 (1) ADDRESS 2694 Kimberly Drive
 NO. OF BLDGS ON PARCEL
 BEFORE: 1 AFTER: 1 THIS CONSTRUCTION
 (1) TELEPHONE 241-4447
 USE OF EXISTING BLDGS Home
 (2) APPLICANT Valerie Brooks
 DESCRIPTION OF WORK AND INTENDED USE: Room
 (2) ADDRESS 2694 Kimberly Drive
addition on south side of house
 (2) TELEPHONE 241-4447

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 RSF-2 Maximum coverage of lot by structures 25%
 SETBACKS: Front 20' from property line (PL) Parking Req't 2
 or 45' from center of ROW, whichever is greater
 Side 15' from PL Rear 30' from PL Special Conditions _____
 Maximum Height 32'
 CENSUS 10 TRAFFIC 17 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).

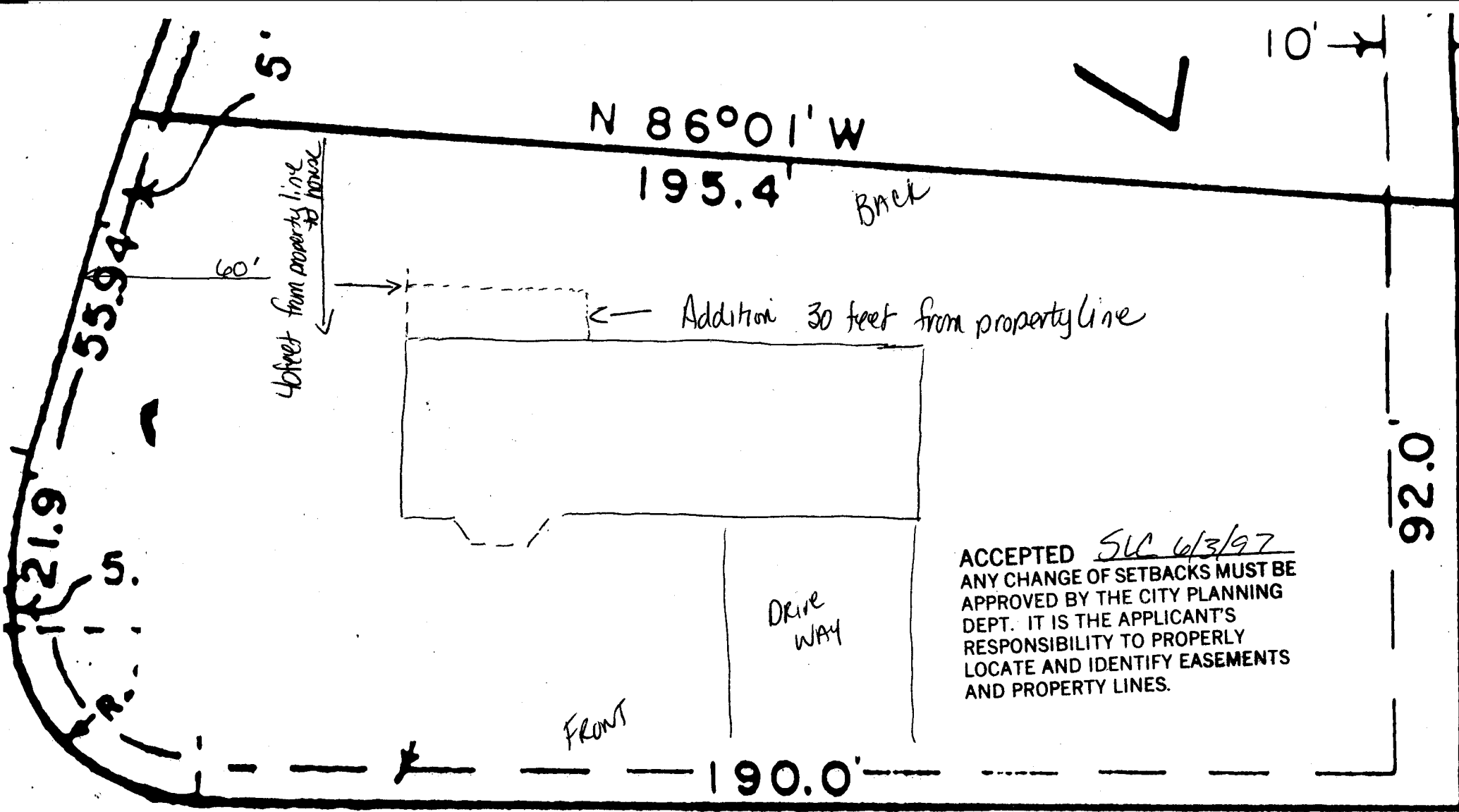
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily be limited to non-use of the building(s).

Applicant Signature Valerie Brooks Date 6/3/97
 Department Approval Antonia Costello Date 6/3/97

Additional water and/or sewer tap fee(s) are required: YES _____ NO W/O No. n/a no chg in used
 Utility Accounting Antonia Costello Date 06/03/97

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)



ACCEPTED SUC 6/3/97
 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.

DRIVE 350.31'

07.31'