

FEE \$	10. —
TCP \$	—
SIF \$	292. —



BLDG PERMIT NO. 02820

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG ADDRESS 629 SILVER OAK DR TAX SCHEDULE NO. 2945-034-00-176

SUBDIVISION FALL VALLEY SQ. FT. OF PROPOSED BLDG(S)/ADDITION 1704

FILING 1 BLK 5 LOT 1 SQ. FT. OF EXISTING BLDG(S) N/A

(1) OWNER JOHN DAVIS NO. OF DWELLING UNITS BEFORE: 0 AFTER: 1 THIS CONSTRUCTION

(1) ADDRESS P.O. BOX 2861

(1) TELEPHONE 243-2308 NO. OF BLDGS ON PARCEL BEFORE: 0 AFTER: 1 THIS CONSTRUCTION

(2) APPLICANT CASTLE HOMES, INC. USE OF EXISTING BLDGS NO

(2) ADDRESS 556 25 ROAD DESCRIPTION OF WORK AND INTENDED USE: _____

(2) TELEPHONE 248-9708 SFR

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 PR-2.9 Maximum coverage of lot by structures _____

SETBACKS: Front 15' 20'-garage from property line (PL) Parking Req'mt 2
 or _____ from center of ROW, whichever is greater

Side 10' from PL Rear 20' from PL Special Conditions _____

Maximum Height 32'

CENSUS 10 TRAFFIC 19 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 MeLanie D. Koch Date 11/6/97

Department Approval Antonia Castello Date 11-10-97

Additional water and/or sewer tap fee(s) are required: YES NO _____ W/O No. 10691

Utility Accounting Chris Hanson Date 11-10-97

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)

