FEE\$ 10 00 TCP\$ 1052 63	BLDG PERMIT NO. 122582
SIF\$ 797	2005B
Comparison of the second	
	velopment Department
BLDG ADDRESS 25 43 Jrails Endet	TAX SCHEDULE NO. 2945-031-44-007
SUBDIVISION Compartox North	SQ. FT. OF PROPOSED BLDG(S)/ADDITION 1332
FILINGBLKLOT	SQ. FT. OF EXISTING BLDG(S)
"OWNER Acreat New Homes	NO. OF DWELLING UNITS
"ADDRESS 3032 I-70 B. 1000	BEFORE: AFTER: THIS CONSTRUCTION
(1) TELEPHONE <u>434-4414</u>	NO. OF BLDGS ON PARCEL BEFORE: THIS CONSTRUCTION
@ APPLICANT (freat Hew Homes	USE OF EXISTING BLDGS
@ ADDRESS 3032 I= 70 B. 1000	DESCRIPTION OF WORK AND INTENDED USE: MU
⁽²⁾ TELEPHONE <u>434-4414</u>	Const. Single Family Res.
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 CO	OMMUNITY DEVELOPMENT DEPARTMENT STAFF 🖘
$zone _ PK 3il$	Maximum coverage of lot by structures
SETBACKS: Frontfrom property line (PL)	Parking Req'mt
or from center of ROW, whichever is greater $20'$ ON F'	2 Special Conditions
Side <u>75</u> from PL Rear <u>30</u> ON Fi Trom PL Rear <u>30</u> Rear	L to Kay
Maximum Height 50	CENSUS_ <u>10</u> _TRAFFIC_ <u>19_</u> 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	Date 051/97
Department Approval	1 eller Date 11.5.97
Additional water and/or sewer tap fee(s) are required: Y	ES X NO W/O NO. 10680

Utility Accounting ______ Date _____ Date ______ Date ______ Date _______ 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)

