

FEE \$	10.00
TCP \$	
SIF \$	



BLDG PERMIT NO. 104333

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG ADDRESS 2218 Coke Ovens Ct. TAX SCHEDULE NO. 2945-193-01-022

SUBDIVISION Monument Valley SQ. FT. OF PROPOSED BLDG(S)/ADDITION 4,900

FILING 5 BLK 1 LOT 22 SQ. FT. OF EXISTING BLDG(S) 0

(1) OWNER Robert R. Watson NO. OF DWELLING UNITS
BEFORE: 0 AFTER: 1 THIS CONSTRUCTION

(1) ADDRESS 257 Allene Ave.

(1) TELEPHONE 242-8648 NO. OF BLDGS ON PARCEL
BEFORE: 0 AFTER: 1 THIS CONSTRUCTION

(2) APPLICANT Sheryl Murphy USE OF EXISTING BLDGS _____

(2) ADDRESS 2397 Broadway DESCRIPTION OF WORK AND INTENDED USE: Blk

(2) TELEPHONE 242-4900 Single family Residence

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-1.6 Maximum coverage of lot by structures _____

SETBACKS: Front 40' from property line (PL) Parking Req'mt 2
or _____ from center of ROW, whichever is greater

Side 35' from PL Rear 35' from PL Special Conditions _____

Maximum Height _____

CENSUS 1401 TRAFFIC 64 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 Sheryl Murphy Date 4-7-98

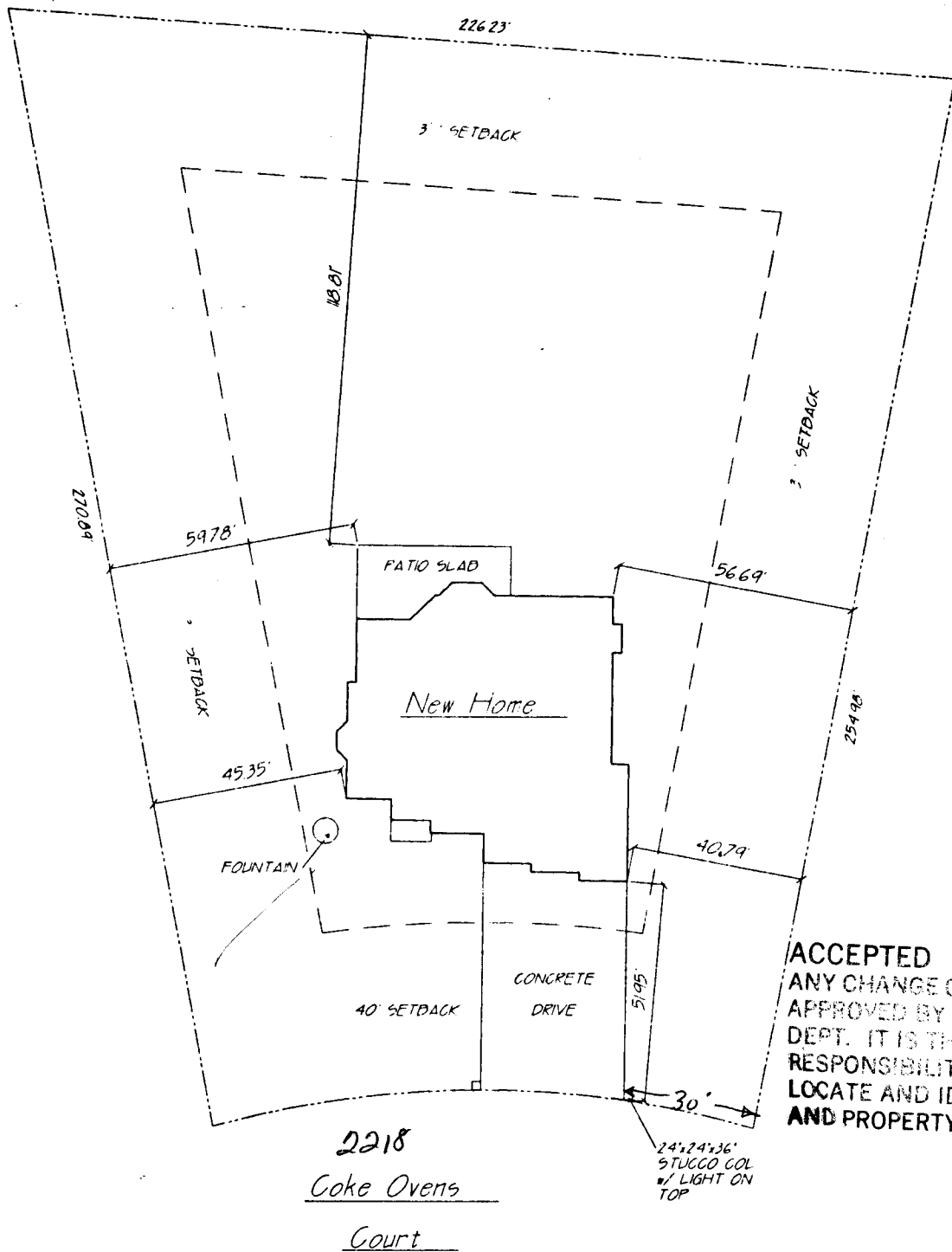
Department Approval Kathy Valdez Date 4-7-98

Additional water and/or sewer tap fee(s) are required: YES NO W/O No. 11171

Utility Accounting Lucy Lopez Date 4/2/98

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 KV 4-7-98 Per (RE)
 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.

SCALE 1" = 2000

SEWER/VEHICULAR LOCATION
 O.K.
 CULVERT REQUIRED
 (RE) checked
 3/19/98

Lot 22, Block 1
Monument Valley Filing 5

2218
Coke Ovens
Court

PERMIT FOR ACCESS OR SURFACE ALTERATION WITHIN PUBLIC RIGHT OF WAY

Copy Distribution
 White-Contractor
 Canary-Office File
 Green-Inspector
 Pink-Street Supt.

CITY OF GRAND JUNCTION
 250 North Fifth Street
 Grand Junction, CO 81501

Department of Public Works
 Engineering Division
 Phone (970) 244-1555
 Fax (970) 244-1599

5502

Application For: Access Surface Alteration

Company MC Construction

Concrete Curbing/Sidewalk License No. _____

Address 2397 Broadway

City G.J. State CO Zip Code 81503

Application Date 4-2-98

Date Work to Begin 4-9-98

Anticipated Completion Date 4-15-98

Job Address or Location 2218 Coke Oven Ct.

Responsible Charge

In accepting this permit the undersigned, representing the Permittee, verifies that he has read and understands all the provisions and requirements of this permit; that he has authority to sign for and bind the Permittee; and by virtue of his signature the Permittee is bound by and agrees to comply with all City ordinances, standards and specifications regulating construction.

Responsible Construction Supervisor Merald Murphree 250-1590
 Phone No. 242-4500

Alternate Responsible Person Rafael Costa 245-4531
 Phone No. _____

After Working Hours Contact Merald Murphree 242-4500
 Phone No. _____

Type of Performance/Warranty Guarantee _____

In the amount of _____

Type of Work

1 Remove Existing 2 Repair Existing 3 Replace Existing 4 New Installation

If Utility Work

1 Sanitary Sewer 1 Irrigation 1 Driveway 1 Underground Power Main Line

2 Storm Sewer 2 Curb & Gutter 2 Telephone 2 Gas Service Line

3 Water 3 Sidewalk 3 Cable T.V. 3 Other _____

Estimated Quantities

Curb, Gutter & Sidewalk _____ Lineal Feet

Curb & Gutter _____ Lineal Feet

Sidewalk _____ Lineal Feet

Driveway Section _____ Square Yards

Drain Pan _____ Lineal Feet

Excavation Volume _____ Cubic Yards

Sidewalk Crossing Drain _____ Each

Storm Drain Inlet _____ Each

Asphalt Pavement _____ Square Yards

Concrete Pavement _____ Square Yards

Pipe size, type, length 15" - 18" - 28" R.C.P. Lineal Feet

Other Asphalt or CAP

Requirements (To Be Completed By City)

Yes No

Performance Guaranty

Traffic Control Plan

Pedestrian Safety Plan

Inspection of Concrete Forms & Base

Inspection of Facilities Prior to Back-Fill

Inspection of Subgrade After Back-Fill

Final Inspection Upon Completion of Work

Community Development Department Approval *

End of day surface restoration required. (Surfacing material to be used _____)

Testing Requirements* OR ~~_____~~

Backfill Compaction Test(s) AASHTO T-99 ADS

Roadbase Compaction Test(s) AASHTO T-180 Pipe

Bituminous Pavement Compaction Test(s) AASHTO T-230

Concrete Slump/Air Test(s) AASHTO T-119, T-152

Concrete Compressive Strength AASHTO T-22, T-23

Other Testing: _____

* All compliance testing shall be performed by a qualified independent laboratory. Frequency of testing shall be in accordance with city specifications. (Water Conservancy Districts Exempt)

Permit Fee

Curbing/Sidewalk/Driveway Permit (\$60) \$ _____

Pavement Cut/Excavation Permit (\$60) \$ _____

Plus \$0.10 per linear foot of trench over 100' in length \$ _____

Other \$ N.C.

Total Permit Fees \$ _____

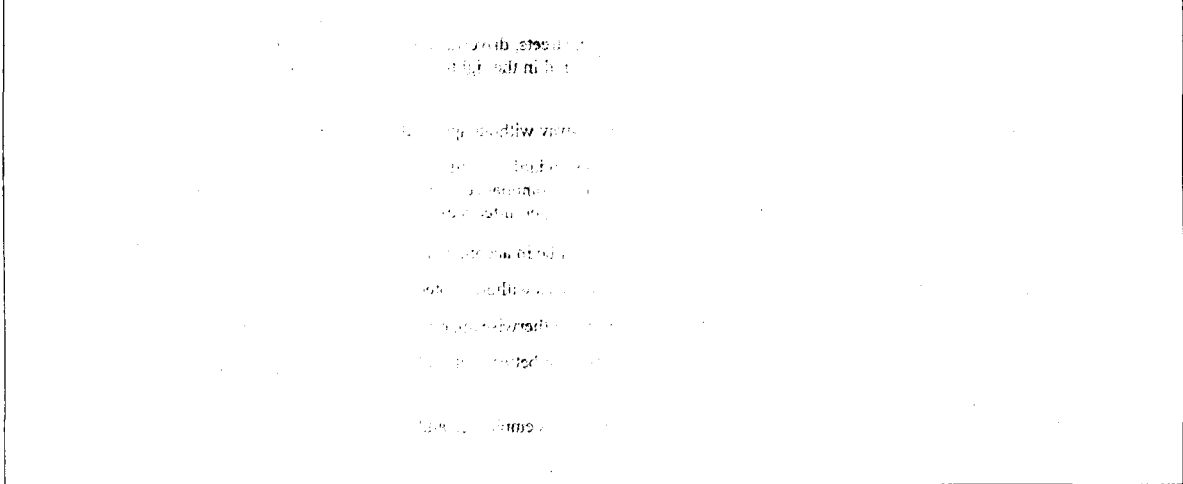
Contractor Merald Murphree

Surface Alteration Permit Valid For 6 Months From Date Issued

Preconstruction Inspection by: _____ Date _____

Public Works Permit Approval by: [Signature] Date 4-3-98

Final Inspection by: _____ Date _____



The above space is provided for a sketch of the proposed installation. (see additional provisions and requirements on reverse side)