	BLDG PERMIT NO. Lalo 3-13 NG CLEARANCE					
(Single Family Residential and Accessory Structures) Community Development Department						
BLDG ADDRESS 2530 Falls Upen Cirtax SCHEDULE NO. 2945-032-31-015						
· · · · · · · · · · · · · · · · · · ·	SQ. FT. OF PROPOSED BLDG(S)/ADDITION $2410$					
	SQ. FT. OF EXISTING BLDG(S)					
"OWNER JP White Const.						
(1) ADDRESS 3061 Avalon Dr						
(1) TELEPHONE 434-5067	NO. OF BLDGS ON PARCEL / THIS CONSTRUCTION					
<sup>(2)</sup> APPLICANT <u> </u>	USE OF EXISTING BLDGS NA					
(2) ADDRESS	DESCRIPTION OF WORK AND INTENDED USE:					
	single family residence					
۲ REQUIRED: One plot plan, on 8 ½" 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 182						
ZONE PR23	Maximum coverage of lot by structures					
SETBACKS: Front from property line (PL	1					
or from center of ROW, whichever is greater						
Side <u>16</u> from PL Rear <u>30</u> from	Special Conditions PL					
Maximum Height	CENSUS 10 TRAFFIC 19 ANNX#					
Modifications to this Planning Clearance must be app	proved, 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	arlena wh	ite	Date	7-2	9-98
Department Approval	1212.	fello	Date	-12	-98-
Additional water and/or se	ewer tap fee(s) are required:		W/O No.	115.	22
Utility AccountingR	Raymond		Date 8	1121	98
VALID FOR SIX MONTHS	S FROM DATE OF ISSUAN	CE (Section 9-3-2C Gra	and Junction	Zonind	& Development Code)

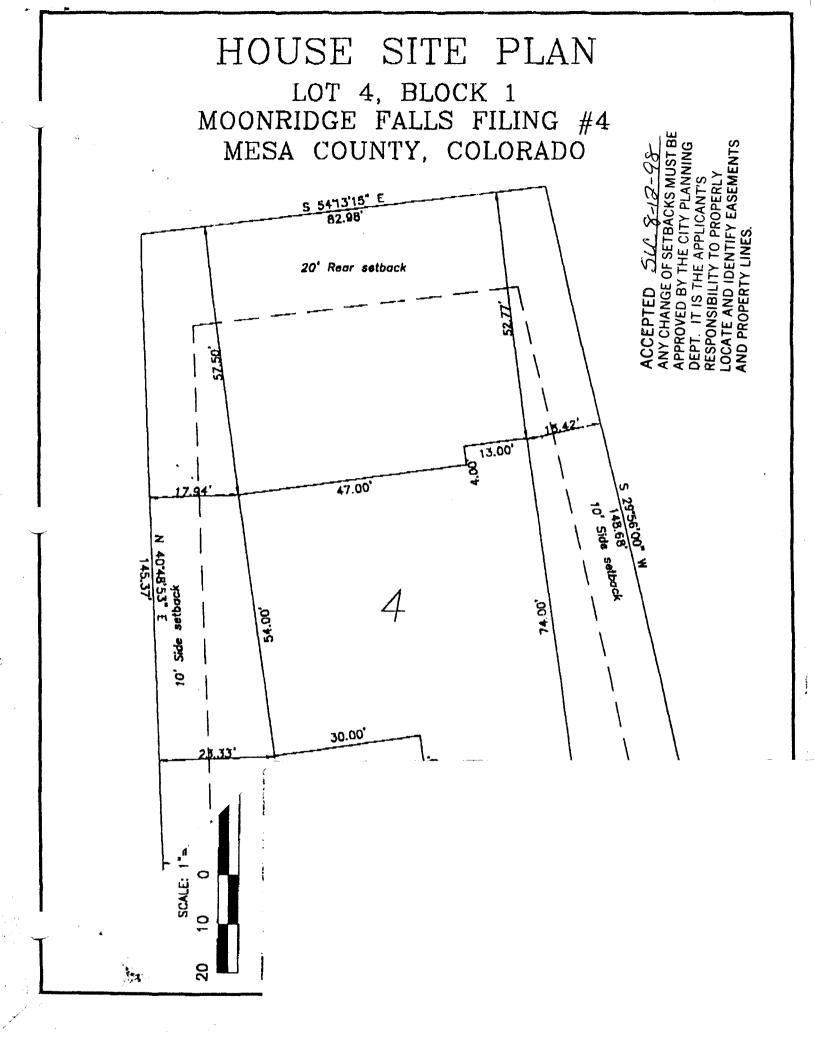
ROMIDATE t Code) (Section ۱ŗ

(White: Planning)

(Yellow: Customer)

(Pink: Building Department)

(Goldenrod: Utility Accounting)



.