

FEE \$	10.-
TCP \$	500.-
SIF \$	292.-



BLDG PERMIT NO. 64421

PLANNING CLEARANCE
(Single Family Residential and Accessory Structures)
Community Development Department

BLDG ADDRESS 2535 FALLS VIEW CIRCLE TAX SCHEDULE NO. 2945-032-00-015

SUBDIVISION MOONRIDGE FALLS SQ. FT. OF PROPOSED BLDG(S)/ADDITION ML-1873
BASEMENT-1800

FILING 4 BLK 3 LOT 1 SQ. FT. OF EXISTING BLDG(S) NONE

(1) OWNER BROCK, RONALD K & JANET S NO. OF DWELLING UNITS
BEFORE: 0 AFTER: 1 THIS CONSTRUCTION

(1) ADDRESS P O BOX 3084 GJ 81502

(1) TELEPHONE (970) 245-5685 NO. OF BLDGS ON PARCEL
BEFORE: 0 AFTER: 1 THIS CONSTRUCTION

(2) APPLICANT RONALD K BROCK USE OF EXISTING BLDGS N/A

(2) ADDRESS P O BOX GJ 81502 DESCRIPTION OF WORK AND INTENDED USE: _____

(2) TELEPHONE (970) 245-5685 construct a new 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 about the parcel.

THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF

ZONE PR 23 Maximum coverage of lot by structures _____

SETBACKS: Front 20' 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 _____

CENSUS 10 TRAFFIC 19 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 Ronald K. Brock Date 8/4/98

Department Approval Shirley J. Costello Date 8-6-98

Additional water and/or sewer tap fee(s) are required: YES NO _____ W/O No. 11511

Utility Accounting R. Raymond Date 8/6/98

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)

2535 FALLS VIEW CIRCLE

REVIEWED DRAINAGE PLAN

7/23/98

Walter B. Matuschick Inc

APPROVED DISAPPROVED

APPROVED WITH CONDITIONS

FALLS VIEW CIRCLE

ACCEPTED SLC 8-6-98
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.

