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BLDG PERMIT NO. 68178

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG ADDRESS 2746 OLSON AVE TAX SCHEDULE NO. 2945-243-10-004
 SUBDIVISION DAVE OLSON SQ. FT. OF PROPOSED BLDG(S)/ADDITION Ø
 FILING _____ BLK _____ LOT _____ SQ. FT. OF EXISTING BLDG(S) 2,000
 (1) OWNER LAVONIA A. INGELHART NO. OF DWELLING UNITS
 BEFORE: 1 AFTER: Ø THIS CONSTRUCTION
 (1) ADDRESS 2748 OLSON AVE NO. OF BLDGS ON PARCEL
 BEFORE: 3 AFTER: Ø THIS CONSTRUCTION
 (1) TELEPHONE 970-242-1644 USE OF EXISTING BLDGS HOME
 (2) APPLICANT LAVONIA A. INGELHART DESCRIPTION OF WORK AND INTENDED USE:
 (2) ADDRESS SAME DEMOLITION
 (2) TELEPHONE SAME

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 RSF-8 Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL)
 or _____ from center of ROW, whichever is greater
 Side _____ from PL Rear _____ from PL
 Maximum Height _____
 Parking Req'mt _____
 Special Conditions Any new bldg will require another Planning Clearance
 CENSUS 13 TRAFFIC 80 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 Lavonia A. Ingelhart Date 12/30/98
 Department Approval Ante Costello Date 12-30-98

Additional water and/or sewer tap fee(s) are required: YES _____ NO W/O No. _____
 Utility Accounting K Duncan Date 12/30/98

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)