

FEE \$	10.00
TCP \$	—
SIF \$	—



BLDG PERMIT NO. 107152

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

PAID
 001 05 1998

BLDG ADDRESS 2321 South Rim Dr TAX SCHEDULE NO. 2945-083-18-006

SUBDIVISION South Rim filing #1 SQ. FT. OF PROPOSED BLDG(S)/ADDITION 416 sq

FILING 1 BLK 2 LOT 6 SQ. FT. OF EXISTING BLDG(S) 1,891 Living

(1) OWNER Curtis Berg NO. OF DWELLING UNITS
 BEFORE: 1 AFTER: 1 THIS CONSTRUCTION

(1) ADDRESS 2321 South Rim Dr.

(1) TELEPHONE _____ NO. OF BLDGS ON PARCEL
 BEFORE: 1 AFTER: 1 THIS CONSTRUCTION

(2) APPLICANT FISHER CONST. USE OF EXISTING BLDGS _____

(2) ADDRESS 453 Stepping Stone Ct NW DESCRIPTION OF WORK AND INTENDED USE: _____

(2) TELEPHONE 250-4640 ADDITION MASTER BEDROOM

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 Maximum coverage of lot by structures _____

SETBACKS: Front 20 from property line (PL) Parking Req'mt 2 spaces
 or _____ from center of ROW, whichever is greater

Side 10 from PL Rear 20 from PL Special Conditions ACC approval required

Maximum Height 28'

CENSUS 1401 TRAFFIC 91 ANNEX# _____

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 Michael Fisher Date 10/2/98

Department Approval Kathy Porter Date 10/5/98

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

Utility Accounting 10 Date 10/5/98

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)

