<u>Ar</u>	VAR-1999-125	
FEE\$ None	BLDG PERMIT NO. 69692	
TCP \$		
SIF \$		
Single Family Residential and Accessory Structures)Scommunity Development Department		
BLDG ADDRESS 907 1.845 St.	TAX SCHEDULE NO945-141 -11-017	
SUBDIVISION	SQ. FT. OF PROPOSED BLDG(S)/ADDITION 600 1	
FILING BLK 18 LOT 11/20/ 20\$21	SQ. FT. OF EXISTING BLDG(S) 600 2	
	NO. OF DWELLING UNITS BEFORE:	
"ADDRESS 907 N. EIGHTH ST.	NO. OF BLDGS ON PARCEL	
(1) TELEPHONE (970) 245-1355		
(2) APPLICANT SAME AS ABOVIE	USE OF EXISTING BLDGS 100ma	
(2) ADDRESS	DESCRIPTION OF WORK AND INTENDED USE:	
	ADD 2NO STORY	
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 <del>the pro</del> perty, driveway location & width & all easements & rights-of-way which abut the parcel.		
THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF 🐲		
ZONE RMF-32	Maximum coverage of lot by structures $60\%$	
SETBAOKS: Front from property line (PL) or from center of ROW, whichever is greater	Parking Req'mt	
	Special Conditions Setbactes as per submitted	
Side <u>10</u> from PL Rear <u>600</u> from F Maximum Height <u>32</u>	- plan (existing building foot print plus 6' porch over hang in front yourd) CENSUS TRAFFICANNX#	

Modifications to this Planning Clearance must be approved, in writing, by 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, if applicable, 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 Lehou Littadae	Date 6/28/99
Department Approval	Date 6/28/99
Additional water and/or sewer tap fee(s) are required: YES	NO X W/O No.
Utility Accounting	Date 28/99
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section	

(White: Planning)

- (Yellow: Customer)
- (Pink: Building Department)

(Goldenrod: Utility Accounting)