

FEE \$	10.00
TCP \$	—
SIF \$	—

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

BLDG PERMIT NO. _____



None req'd

Your Bridge to a Better Community

BLDG ADDRESS 403 Altamira CT SQ. FT. OF PROPOSED BLDGS/ADDITION 80
 TAX SCHEDULE NO. 2945-183-04-015 SQ. FT. OF EXISTING BLDGS 1700
 SUBDIVISION Trails West TOTAL SQ. FT. OF EXISTING & PROPOSED 1781
 FILING 2 BLK 1 LOT 2 NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction
 (1) OWNER Neil + Christine Thompson Trust NO. OF BUILDINGS ON PARCEL
 Before: 1 After: 2 this Construction
 (1) ADDRESS 403 Altamira CT USE OF EXISTING BUILDINGS Residence
 (1) TELEPHONE 970-243-7184 DESCRIPTION OF WORK & INTENDED USE Storage
 (2) APPLICANT Neil Thompson TYPE OF HOME PROPOSED:
 (2) ADDRESS 403 Altamira CT Site Built Manufactured Home (UBC)
 (2) TELEPHONE 970-243-7184 Manufactured Home (HUD)
 Other (please specify) _____

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-4 Maximum coverage of lot by structures _____
 SETBACKS: Front 23' from property line (PL) Permanent Foundation Required: YES _____ NO X
 or 45' from center of ROW, whichever is greater
 Side 7' from PL, Rear 45' from PL Row Parking Req'mt 2
 Maximum Height 32' front setback Special Conditions _____
 CENSUS 1401 TRAFFIC 103 ANN# _____

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 Neil Thompson Date 11-15-99
 Department Approval _____ Date _____

Additional water and/or sewer tap fee(s) are required:	YES	NO <u>X</u>	W/O No. <u>—</u>
Utility Accounting	Date <u>11/15/99</u>		

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)

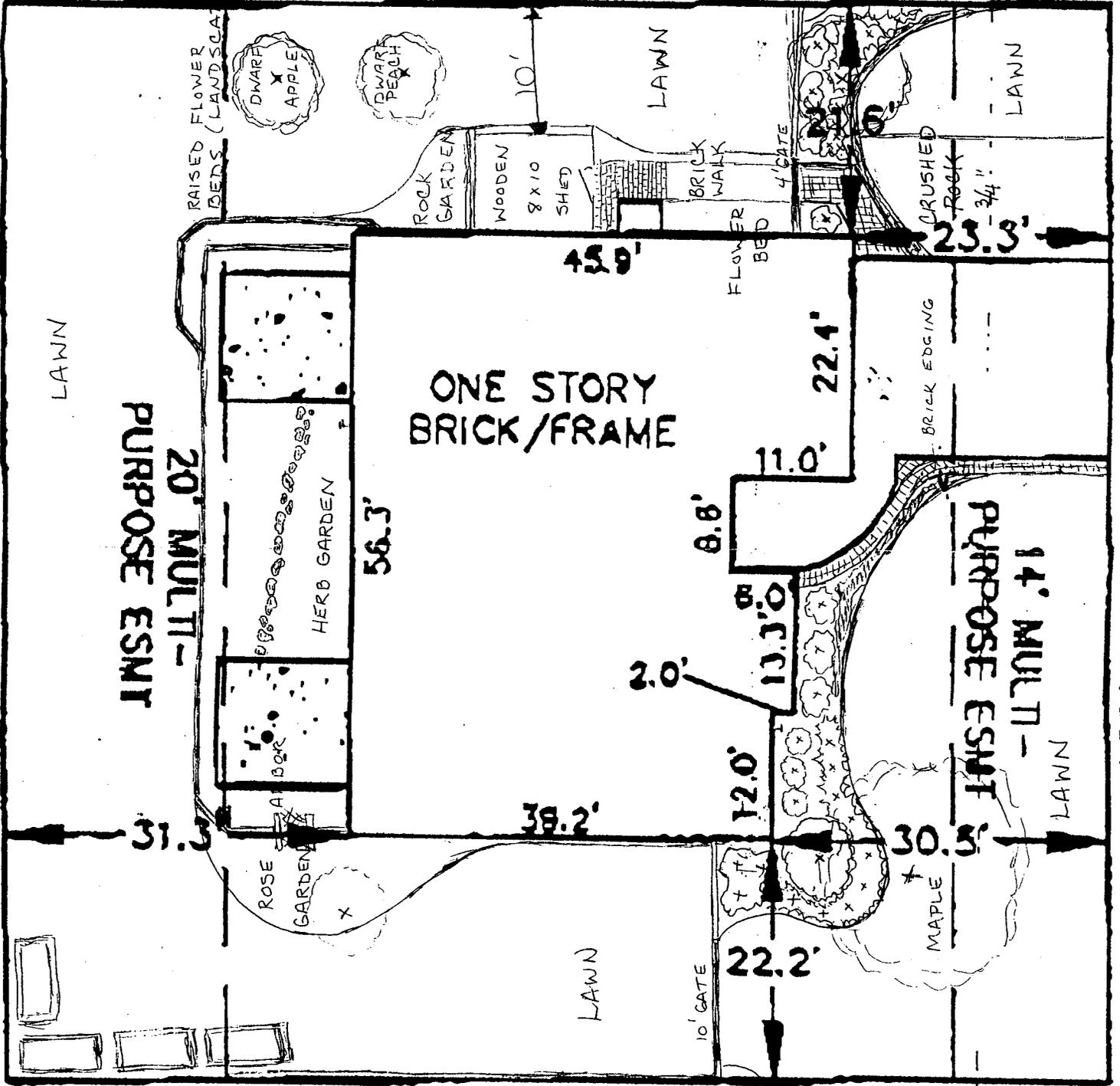
65' setback from centerline of S. Camp St.

403 Altamira Ct.

N89°34'00"E 100.99'

S00°22'00"E 100.00'

S89°34'00"W 100.99'



RAISED MOVABLE VEG. BEDS

11/12
6' fence
15' setback from centerline of road

45' setback from centerline of road