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|--------|-------|
| FEE \$ | 10.00 |
| TCP \$ | — |
| SIF \$ | — |

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

BLDG PERMIT NO. 72032



Your Bridge to a Better Community

Et

BLDG ADDRESS 1135 Gunnison Ave SQ. FT. OF PROPOSED BLDGS/ADDITION 192 ^{sq'}

TAX SCHEDULE NO. 2995-141-30-005 SQ. FT. OF EXISTING BLDGS 1550 ^{sq'}

SUBDIVISION City TOTAL SQ. FT. OF EXISTING & PROPOSED 1742 ^{sq'}

FILING _____ BLK 45 LOT 9 & 10 NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction

(1) OWNER Mary E. O'Malley NO. OF BUILDINGS ON PARCEL
 Before: 2 After: 2 this Construction

(1) ADDRESS 1135 Gunnison Ave USE OF EXISTING BUILDINGS Home

(1) TELEPHONE 243-8791 DESCRIPTION OF WORK & INTENDED USE Sunroom

(2) APPLICANT SAME TYPE OF HOME PROPOSED: N/A
 _____ Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 _____ Other (please specify) _____

(2) ADDRESS _____

(2) TELEPHONE _____

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 20 from property line (PL) Permanent Foundation Required: YES NO _____
 or _____ from center of ROW, whichever is greater

Side 5 from PL, Rear 15 from PL Parking Req'mt _____

Maximum Height 32 Special Conditions _____

CENSUS 2 TRAFFIC 36 ANNEX# _____

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 M. Tim O'Malley Date 09.20.99

Department Approval Kristen L. Ambrose Date 9/20/99

| | | | |
|--|----------------------|--|---------------------|
| Additional water and/or sewer tap fee(s) are required: | YES | NO <input checked="" type="checkbox"/> | W/O No. _____ |
| Utility Accounting | <u>Debi Overholt</u> | | Date <u>9/20/99</u> |

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

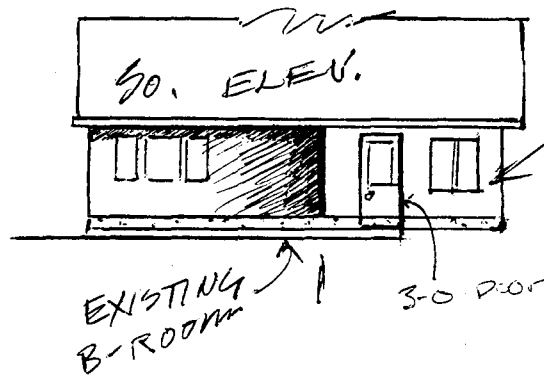
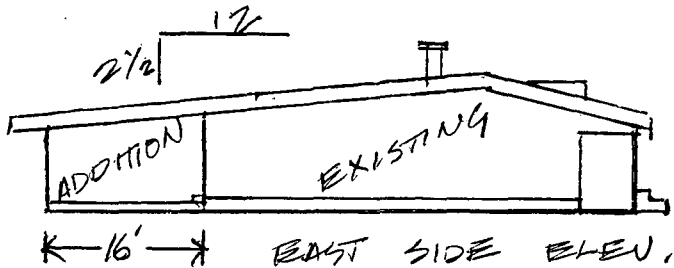
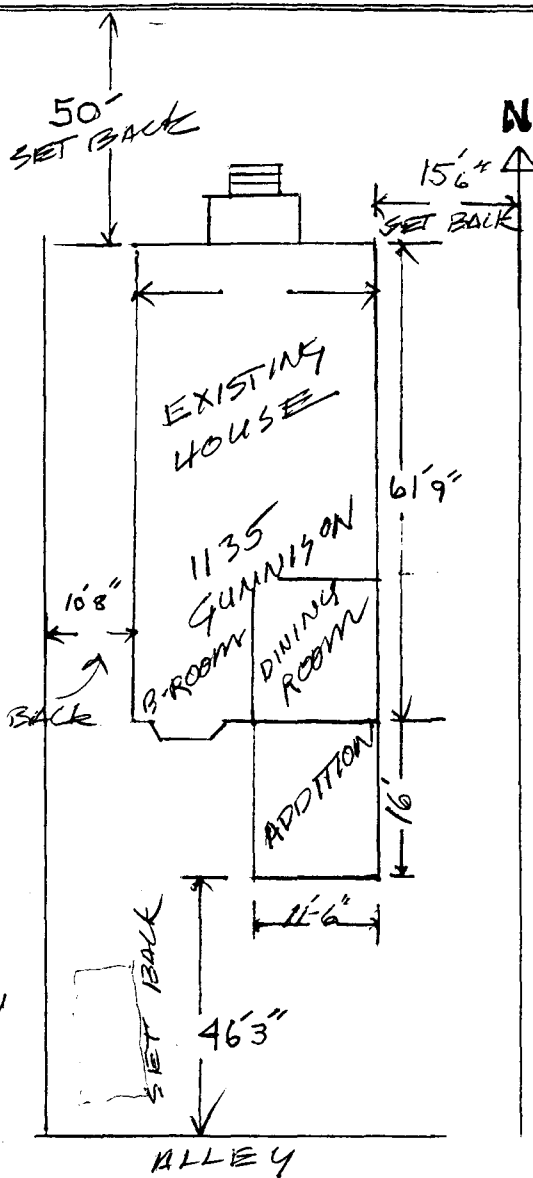
(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

GUNNISON AVE.

SUN ROOM ADDITION @ 1135
 GUNNISON, GR. SET, CO.

PURPOSED 11'-6" x 16' ROOM
 ADDITION AT REAR OF HOUSE
 ON MONO SLAB FOUNDATION
 INCLUDING 12" THICKEN EDGES
 W/ 2 STRANDS OF #4 REBAR
 AROUND PERIMETER + PINNED
 TO EXISTING 8" STEIN WALL FOUND.
 5000 LB. CONCRETE W/ WIRE

ALL LABOR AND MATERIALS TO
 CURRENT CODES AND STANDARDS
 INCL. ROOF TO 30 P.S.F. +
 LIVE LOAD AS WELL AS
 SMOKE DETECTION IN ADDITION



KCA 9/20/99
 I AM THE ARCHITECT'S
 RESPONSIBILITY TO PROPERLY
 LOCATE AND IDENTIFY EASEMENTS
 AND PROPERTY LINES.

