FEE \$	10.00
TCP\$	0
SIF \$	0

(White: Planning)

(Yellow: Customer)



BLDG PERMIT NO. 7/002

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG ADDRESS 636 HORRON DR #810	TAX SCHEDULE NO. 2945-024-20-035		
SUBDIVISION Westwood Estates	SQ. FT. OF PROPOSED BLDG(S)/ADDITION		
FILING BLK LOT	SQ. FT. OF EXISTING BLDG(S)		
(1) OWNER SAFFORD	NO. OF DWELLING UNITS REFORE: AFTER: THIS CONSTRUCTION		
(1) ADDRESS 636 HORIZON #810	BEFORE: AFTER: THIS CONSTRUCTION		
(1) TELEPHONE 243-6009	NO. OF BLDGS ON PARCEL BEFORE: AFTER: THIS CONSTRUCTION		
(2) APPLICANT MYERS PROPERTY SURVICE	USE OF EXISTING BLDGS Townhouse UNIT		
(2) ADDRESS P.D. BOX 303/ GRANT from	DESCRIPTION OF WORK AND INTENDED USE: Rebuild		
(2) TELEPHONE <u>255-0775</u>	Existing and food deck sixt peck wew TRI		
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 the property, driveway location & width & all easements & rights-of-way which abut the parcel.			
property lines, ingress/egress to the property, ariveway to	cation & width & all easements & rights-or-way which abut the parcel.		
© THIS SECTION TO BE COMPLETED BY C	OMMUNITY DEVELOPMENT DEPARTMENT STAFF 🖘		
ZONE PR-12	Maximum coverage of lot by structures		
SETBACKS: Front from property fine (PL)	Parking Req'mt		
or from center of ROW, whichever is greater	Special Conditions water and Propose		
Side from PL Rear from P Maximum Height	()		
	census 10 traffic 23 annx#		
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).			
	the information is correct; I agree to comply with any and all codes, o the project. I understand that failure to comply shall result in legal to non-use of the building(s).		
Applicant Signature	Date 6-28-99		
Department Approval X Valde	Date 10-28-01		
Additional water and/or sewer tap/fee(s) are required: YESNOW/O No. DO OF USe			
Utility Accounting Modella Croa	Date (
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE) Eate		

(Pink: Building Department)

(Goldenrod: Utility Accounting)