FEE\$	10
TCP\$	500-
SIF \$	A-



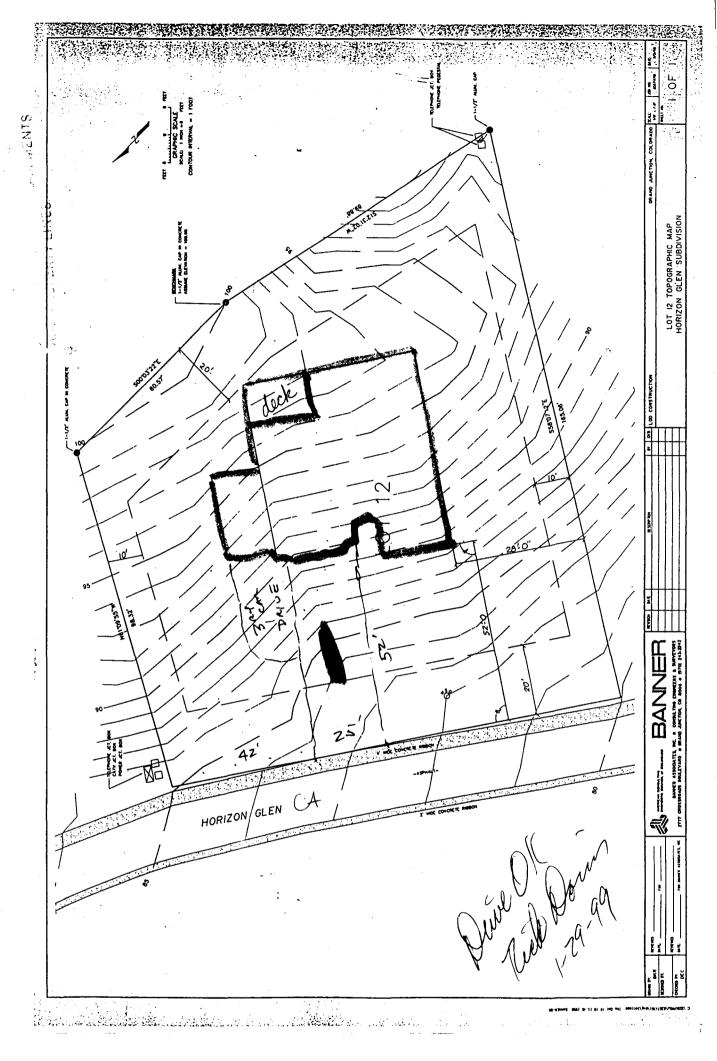
BLDG PERMIT NO. 68471

## **PLANNING CLEARANCE**

(Single Family Residential and Accessory Structures)

**Community Development Department** 

BLDG ADDRESS 3810 HORIZEN Glen CT	TAX SCHEDULE NO. 7945-021-13-032	
SUBDIVISION HORIZON GLON.	/	
FILING BLK LOT 12	SQ. FT. OF EXISTING BLDG(S)	
(1) OWNER TOM BELLAKTRO	NO. OF DWELLING UNITS BEFORE: AFTER: THIS CONSTRUCTION	
(1) ADDRESS 841 N. 13+	NO OF BUDGS ON BARCEI	
(1) TELEPHONE 257-5708	BEFORE: O AFTER: THIS CONSTRUCTION	
(2) APPLICANT LGD Construction	USE OF EXISTING BLDGS S/F-	
(2) ADDRESS 2315 HALL AUE	DESCRIPTION OF WORK AND INTENDED USE:	
(2) TELEPHONE 243-6471	S/F RESIDENCE	
REQUIRED: One plot plan, on 8 $\frac{1}{2}$ " 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	Maximum coverage of lot by structures	
SETBACKS: Front 20 from property line (PL) or from center of ROW, whichever is greater	Parking Req'mt Z	
Side */0 from PL Rear *20 from F	Special Conditions ACCO approval regime (C)	
Maximum Height	CENSUS \(\sigma\) TRAFFIC \(\frac{2}{\sigma}\) 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).		
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	Date	
Department Approval X . V all	Date 2.4.69	
Additional water and/or sewer tap fee(s) are required: YES NO W/O No# /1907		
Utility Accounting Chaluman	Date 2 - 4 - 9 9	
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)		
(White: Planning) (Yellow: Customer) (Pin	nk: Building Department) (Goldenrod: Utility Accounting)	



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