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BLDG PERMIT NO. 69470

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

(Handwritten initials)

BLDG ADDRESS 2322 Hwy 6 + 50 TAX SCHEDULE NO. 2945-052-00-067
 SUBDIVISION Mobil City SQ. FT. OF PROPOSED BLDG(S)/ADDITION 14x70
 FILING BLK _____ LOT Space # 36 SQ. FT. OF EXISTING BLDG(S) _____
 (1) OWNER Mobil City NO. OF DWELLING UNITS
 BEFORE: _____ AFTER: _____ THIS CONSTRUCTION
 (1) ADDRESS 2322 Hwy 6 + 50
 (1) TELEPHONE 241-1301 NO. OF BLDGS ON PARCEL
 BEFORE: _____ AFTER: _____ THIS CONSTRUCTION
 (2) APPLICANT Rick Powell USE OF EXISTING BLDGS _____
 (2) ADDRESS same DESCRIPTION OF WORK AND INTENDED USE: _____
 (2) TELEPHONE same Set Mobil Home Residence

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 HA1 HO Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL) Parking Req'mt _____
 or _____ from center of ROW, whichever is greater
 Side _____ from PL Rear Per Park Special Conditions Per Park
 Maximum Height _____ CENSUS 9 TRAFFIC 6 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 R Powell Date 7-5-99
 Department Approval Luiten K. Adkins Date 4/5/99

Additional water and/or sewer tap fee(s) are required: YES _____ NO X W/O No. _____
 Utility Accounting Debi Overholt Date 7-5-99

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)