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BLDG PERMIT NO. 69127

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

(Handwritten initials)

BLDG ADDRESS 293 PINON STREET TAX SCHEDULE NO. 2945-252-00-100
 SUBDIVISION _____ SQ. FT. OF PROPOSED BLDG(S)/ADDITION 720
 FILING BLK _____ LOT _____ SQ. FT. OF EXISTING BLDG(S) _____
 (1) OWNER BOB R DAVIS NO. OF DWELLING UNITS BEFORE: 1 AFTER: 1 THIS CONSTRUCTION
 (1) ADDRESS 293 PINON STREET
 (1) TELEPHONE 242 8381 NO. OF BLDGS ON PARCEL BEFORE: 2 AFTER: 3 THIS CONSTRUCTION
 (2) APPLICANT OWNER USE OF EXISTING BLDGS _____
 (2) ADDRESS _____ DESCRIPTION OF WORK AND INTENDED USE: _____
 (2) TELEPHONE _____ CARAGE - PARK VEHICLES / STORAGE

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 RSE-8 Maximum coverage of lot by structures 45%
 SETBACKS: Front 20' from property line (PL) or 45' from center of ROW, whichever is greater Parking Req'mt _____
 Side 3' from PL Rear 3' from PL Special Conditions _____
 Maximum Height 32' CENSUS 13 TRAFFIC 80 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).

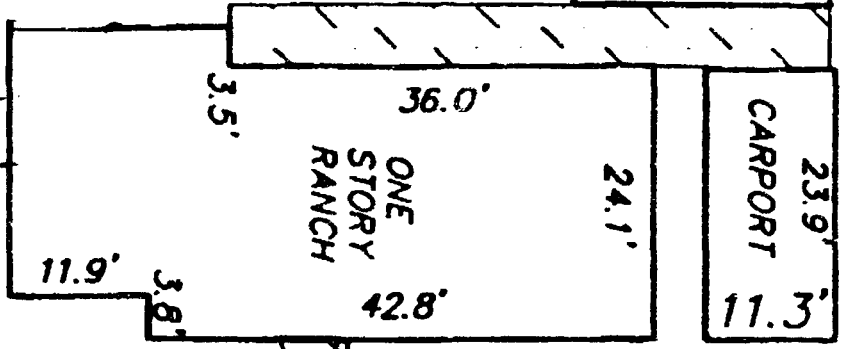
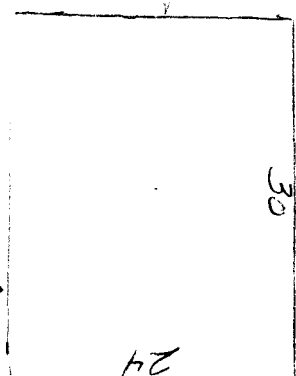
Applicant Signature [Signature] Date 3-12-99
 Department Approval [Signature] Date 3-12-99
 Additional water and/or sewer tap fee(s) are required: YES _____ NO W/O No. require use
 Utility Accounting [Signature] Date 3-12-99

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

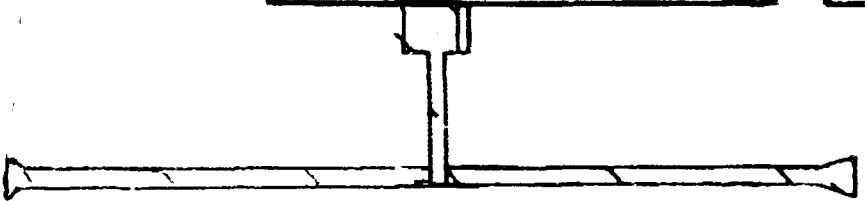
(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

N00°00'00"E 116.40' OVERHEAD POWER

KV 3-12-99



DRIVE



S00°00'00"W 116.40'



PINON STREET