

| | |
|--------|-----|
| FEE \$ | 10' |
| TCP \$ | 0 |
| SIF \$ | 0' |



BLDG PERMIT NO. 68891

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

(Ex)

BLDG ADDRESS 2215 Redlupin Ct TAX SCHEDULE NO. 2945-193-07-016
SUBDIVISION Monument Valley SQ. FT. OF PROPOSED BLDG(S)/ADDITION 2860
FILING/BLK 1 LOT 16 SQ. FT. OF EXISTING BLDG(S) N/A
(1) OWNER Larry Osterburg NO. OF DWELLING UNITS
BEFORE: 0 AFTER: 1 THIS CONSTRUCTION
(1) ADDRESS 1128 Peach Lake Rd W. 54521
(1) TELEPHONE 715-477-1146 NO. OF BLDGS ON PARCEL
BEFORE: 0 AFTER: 1 THIS CONSTRUCTION
(2) APPLICANT Maves Const. Inc USE OF EXISTING BLDGS Single Family Res
(2) ADDRESS 1813 L. 20 Frank A Pkwy DESCRIPTION OF WORK AND INTENDED USE:
(2) TELEPHONE 858-9642-250-0441 Single Family Res

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 PR1.6 Maximum coverage of lot by structures _____
SETBACKS: Front 40' from property line (PL) Parking Req'mt 2
or - from center of ROW, whichever is greater
Side 35' from PL Rear 35' from PL Special Conditions Driveway permit req'd.
Maximum Height _____ CENSUS _____ TRAFFIC _____ 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 Larry Osterburg Date 3-2-99
Department Approval Tina Costello Date 3-5-99
Additional water and/or sewer tap fee(s) are required: YES NO W/O No. #11998 TR 88895
Utility Accounting Chris [Signature] Date 3-5-99

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)

PERMIT FOR ACCESS OR SURFACE ALTERATION WITHIN PUBLIC RIGHT OF WAY

Blue - Distribution
 White - Contractor
 Yellow - Office File
 Green - Inspector
 Pink - Street Supt

CITY OF GRAND JUNCTION
 250 North Fifth Street
 Grand Junction, CO 81501

Department of Public Works
 Engineering Division
 Phone (970) 244-1555
 Fax (970) 244-1599

6033

Application For: Access Surface Alteration

Responsible Charge

Company Maves Const.
General Contractor 2980196
 Concrete Curbing/Sidewalk License No.
 Address 1813 L Rd
 City Fruita State Co Zip Code 81521
 Application Date 3-2-99
 Date Work to Begin 3-5-99
 Anticipated Completion Date _____
 Job Address or Location 2215 Red Canyon Ct.

In accepting this permit the undersigned, representing the Permittee, verifies that he has read and understands all the provisions and requirements of this permit; that he has authority to sign for and bind the Permittee; and by virtue of his signature the Permittee is bound by and agrees to comply with all City ordinances, standards and specifications regulating construction. 250-0441
250-0441
858-9642
 Responsible Construction Supervisor Phone No.
216-0593
 Alternate Responsible Person Phone No.
858-9642
 After Working Hours Contact Phone No.
 Type of Performance/Warranty Guarantee _____
 In the amount of _____

Type of Work 1 Remove Existing 2 Repair Existing 3 Replace Existing 4 New Installation If Utility Work
 1 2 3 4 Sanitary Sewer 1 2 3 4 Irrigation 1 2 3 4 Driveway 1 2 3 4 Underground Power Main Line
 1 2 3 4 Storm Sewer 1 2 3 4 Curb & Gutter 1 2 3 4 Telephone 1 2 3 4 Gas Service Line
 1 2 3 4 Water 1 2 3 4 Sidewalk 1 2 3 4 Cable T.V. 1 2 3 4 Other _____

Estimated Quantities

Curb, Gutter & Sidewalk _____ Lineal Feet Sidewalk Crossing Drain _____ Each
 Curb & Gutter _____ Lineal Feet Storm Drain Inlet _____ Each
 Sidewalk _____ Lineal Feet Asphalt Pavement _____ Square Yards
 Driveway Section _____ Square Yards Concrete Pavement _____ Square Yards
 _____ in Pan _____ Lineal Feet Pipe size, type, length 12" 20ft Lineal Feet
 Excavation Volume _____ Cubic Yards Other _____

Requirements

(To Be Completed By City)

Testing Requirements *

Yes No
 Performance Guaranty
 Traffic Control Plan
 Pedestrian Safety Plan
 Inspection of Concrete Forms & Base
 Inspection of Facilities Prior to Back-Fill
 Inspection of Subgrade After Back-Fill
 Final Inspection Upon Completion of Work
 Community Development Department Approval *
 End of day surface restoration required. (Surfacing material to be used _____)

Backfill Compaction Test(s) AASHTO T-99
 Roadbase Compaction Test(s) AASHTO T-180
 Bituminous Pavement Compaction Test(s) AASHTO T-230
 Concrete Slump/Air Test(s) AASHTO T-119, T-152
 Concrete Compressive Strength AASHTO T-22, T-23
 Other Testing: _____

* All compliance testing shall be performed by a qualified independent laboratory. Frequency of testing shall be in accordance with city specifications.

(Water Conservancy Districts Exempt)

Permit Fee
 Curbing/Sidewalk/Driveway Permit (\$60) \$ _____
 Pavement Cut/Excavation Permit (\$60) \$ _____
 Plus \$0.10 per linear foot of trench over 100' in length \$ _____
 Other \$ _____
 Total Permit Fees \$ 60.00
 Contractor Joe Maves

Preconstruction Inspection by: _____ Date _____
 Public Works Permit Approval by: [Signature] Date 3-3-99
 Final Inspection by: _____ Date _____

Surface Alteration Permit Valid For 6 Months From Date Issued

