

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



BLDG PERMIT NO. 76460

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG ADDRESS 585 25 1/2 Road, #59 TAX SCHEDULE NO. 2945-102-00-100 LAND
7008-234-00-198 HOME

SUBDIVISION PARADISE VALLEY MOBILE HOME PARK SQ. FT. OF PROPOSED BLDG(S)/ADDITION 1,165

FILING BLK _____ LOT 59 SQ. FT. OF EXISTING BLDG(S) 0

(1) OWNER HELEN SOPHOULES NO. OF DWELLING UNITS
 BEFORE: 0 AFTER: 1 THIS CONSTRUCTION

(1) ADDRESS 585 25 1/2 ROAD, #59

(1) TELEPHONE 303 428 8193 NO. OF BLDGS ON PARCEL
 BEFORE: 0 AFTER: 1 THIS CONSTRUCTION

(2) APPLICANT SAV-ON QUALITY HOMES USE OF EXISTING BLDGS SINGLE FAMILY RESIDENCE

(2) ADDRESS 2497 HWY 16+50 DESCRIPTION OF WORK AND INTENDED USE: 16x76

(2) TELEPHONE 9702434406 HUD APPROVED, #NEB1101631

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 per park regs. 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 _____ from PL Special Conditions _____
 Maximum Height _____

CENSUS 4 TRAFFIC 10 ANNEX# _____

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 8/21/00

Department Approval [Signature] Date 8/21/00

Additional water and/or sewer tap fee(s) are required: YES _____ NO X W/O No. _____

Utility Accounting [Signature] Date 8/21/00

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)