

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

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

BLDG PERMIT NO. 77690



Your Bridge to a Better Community

BLDG ADDRESS 2676 Continal Dr. SQ. FT. OF PROPOSED BLDGS/ADDITION 160 sq ft
 TAX SCHEDULE NO. 2701-³254-34-001 SQ. FT. OF EXISTING BLDGS 3500 sq ft
 SUBDIVISION Peach Hill Sub TOTAL SQ. FT. OF EXISTING & PROPOSED 3660 sq ft
 FILING _____ BLK _____ LOT 1 NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction
 (1) OWNER Mike Henderson NO. OF BUILDINGS ON PARCEL
 Before: 1 After: 1 this Construction
 (1) ADDRESS 2676 Continal Dr. USE OF EXISTING BUILDINGS 1
 (1) TELEPHONE 243-4399 DESCRIPTION OF WORK & INTENDED USE addition
 (2) APPLICANT Self TYPE OF HOME PROPOSED:
 (2) ADDRESS _____ Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 (2) TELEPHONE _____ Other (please specify) _____

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 ASF-2 Maximum coverage of lot by structures 30%
 SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES _____ NO _____
 or _____ from center of ROW, whichever is greater
 Side 15' from PL, Rear 30' from PL Parking Req'mt 2
 Maximum Height 35' Special Conditions Acco Required
 CENSUS 10 TRAFFIC 17 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 11-13-00
 Department Approval [Signature] Date 11-13-00

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No <u>no chg in use</u>
Utility Accounting <u>[Signature]</u>	Date <u>11/13/00</u>		

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)

15' easement

121.35'

82' To fence

- 20 -

- 60' - To fence

58' To fence

8

Addition

STUDY

FAMILY ROOM

DINING ROOM

191.98

HALL

Continental Dr.

11/13/00
 ACCEPTED *Clay Wilson*
 ANY CHANGE OF SETBACKS MUST BE
 APPROVED BY THE CITY PLANNING
 DEPT. IT IS THE APPLICANT'S
 RESPONSIBILITY TO PROPERLY
 LOCATE AND IDENTIFY EASEMENTS
 AND PROPERTY LINES.

