FEE\$	10.00
TCP\$	
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## **PLANNING CLEARANCE**

BLDG PERMIT NO.

(Single Family Residential and Accessory Structures) **Community Development Department** 



41357-12111	d	Your Bridge to a Bette	er Community
BLDG ADDRESS 138 Donthy	SQ. FT. OF PROPOSED	BLDGS/ADDITION	980
TAX SCHEDULE NO. 2945 - 252-12-0/	SQ. FT. OF EXISTING BI	_DGS <i>[073</i>	
SUBDIVISION AIFESIA HEIGHTS	TOTAL SQ. FT. OF EXIST	TING & PROPOSED	20,53
FILING BLK 4 LOT 13	NO. OF DWELLING UNIT		
(1) OWNER Felipe, Sania Vorquez	Before: After: NO. OF BUILDINGS ON		
(1) ADDRESS 139 Dord thy AVE	Before: After:	0 .	
(1) TELEPHONE (970) 256-0987	USE OF EXISTING BUIL	<u> </u>	
(2) APPLICANT Same AS Above	DESCRIPTION OF WORK	Pas	uroung usar I derchal
(2) ADDRESS	TYPE OF HOME PROPO	Manufactured Home (L	IBC)
(2) TELEPHONE	Manufactured Ho Other (please spe	me (HUD) ( Added )	to uxisting H
REQUIRED: One plot plan, on 8 ½" x 11" paper, showing property lines, ingress/egress to the property, driveway lo			
property lines, ingress/egress to the property, driveway to	cation & width & all easeme	nts & rights-or-way write	ir abut trie parcer.
THIS SECTION TO BE COMPLETED BY C	OMMUNITY DEVELOPME	NT DEPARTMENT ST	AFF 🖘
ZONE RSF-8	Maximum covera	ge of lot by structures _	4590
SETBACKS: Front 20' from property line (PL) or 45 from center of ROW, whichever is greater	Permanent Found	dation Required: YES_	<b>X</b> _ NO
Side 5' from PL, Rear 15' from F	Parking Req'mt _ PL		
Maximum Height 32'	Special Condition	าร	
Maximum Height		_ TRAFFIC_ <i>\\$0</i> A	NNX#
Modifications to this Planning Clearance must be approstructure authorized by this application cannot be occup Occupancy has been issued, if applicable, by the Buildin	pied until a final inspection l	has been completed an	d a Certificate of
I hereby acknowledge that I have read this application an ordinances, laws, regulations or restrictions which apply action, which may include but not necessarily be limited	to the project. I understand	that failure to comply sh	<u>-</u>
Applicant Signature Jones Chargues	Date	1-24-00	XIMO ETI
Department Approval 4/18hr Magor	) Date	1/25/00	
dditional water and/or sewer tap fee(s) are required:	YES NO	W/O No.	10 0
Utility Accounting	Date /	7-00	guste
		<del></del>	<u> </u>

