

FEE \$	10.00
TCP \$	500.00
SIF \$	292.00

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

BLDG PERMIT NO. 74943



Your Bridge to a Better Community

BLDG ADDRESS 203 DREAM ST SQ. FT. OF PROPOSED BLDGS/ADDITION 1600
TAX SCHEDULE NO. 2943-294-17-003 SQ. FT. OF EXISTING BLDGS 0
SUBDIVISION Chipeta Power TOTAL SQ. FT. OF EXISTING & PROPOSED _____
FILING 1 BLK 1 LOT 3 NO. OF DWELLING UNITS:
Before: 0 After: _____ this Construction
(1) OWNER LARSON LARSON NO. OF BUILDINGS ON PARCEL
Before: 0 After: 1 this Construction
(1) ADDRESS 2205 MESCALGO AVE USE OF EXISTING BUILDINGS RES
(1) TELEPHONE 245-9657 DESCRIPTION OF WORK & INTENDED USE NEW RES
(2) APPLICANT TERRY LARSON TYPE OF HOME PROPOSED:
(2) ADDRESS SAME Site Built _____ Manufactured Home (UBC)
_____ Manufactured Home (HUD)
(2) TELEPHONE Coll-260-0450 _____ 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 PR3-9 Maximum coverage of lot by structures _____
SETBACKS: Front 25 from property line (PL) Permanent Foundation Required: YES NO _____
or _____ from center of ROW, whichever is greater
Side 15 from PL, Rear 15 from PL Parking Req'mt _____
Maximum Height 32' Special Conditions _____
CENSUS 13 TRAFFIC 82 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).

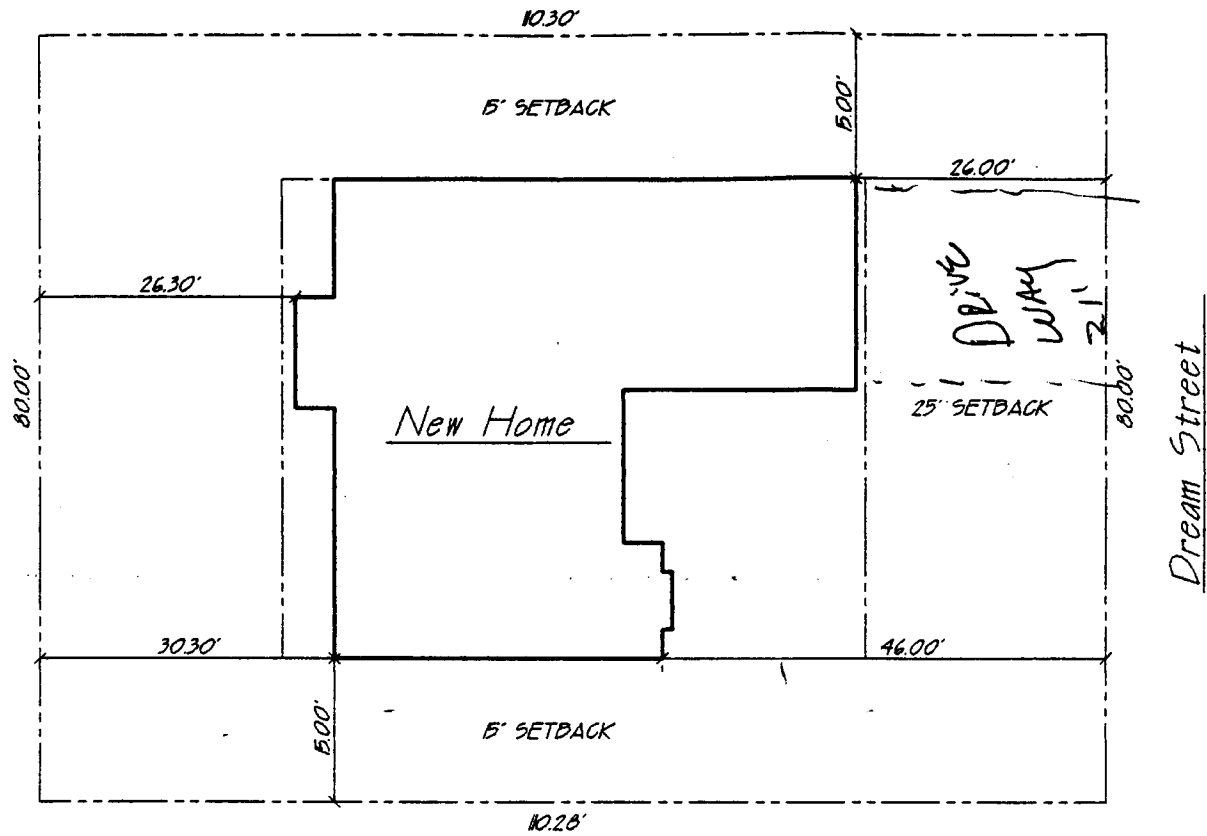
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily be limited to non-use of the building(s).

Applicant Signature [Signature] Date _____
Department Approval [Signature] Date May 2, 2000

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>13066</u>
Utility Accounting	<u>[Signature]</u>		Date <u>5-2-00</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)



SCALE: 1" = 20.00'

DRIVE OK
 END [Signature]
 5/2/00

203 Dream Street

ACCEPTED *[Signature]* 5/2
 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.