

FEE \$ <u>10.00</u>
TCP \$
MF \$

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

BLDG PERMIT NO. 75524



EX

Your Bridge to a Better Community

BLDG ADDRESS 818 ELM AVE SQ. FT. OF PROPOSED BLDGS/ADDITION 675 SF

TAX SCHEDULE NO. 245 114 13 029 SQ. FT. OF EXISTING BLDGS 1200 SF

SUBDIVISION _____ TOTAL SQ. FT. OF EXISTING & PROPOSED 1875 SF

FILING _____ BLK _____ LOT _____ NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction

(1) OWNER BRAD & BARR DAVENPORT NO. OF BUILDINGS ON PARCEL
 Before: 2 After: 2 this Construction

(1) ADDRESS SAME USE OF EXISTING BUILDINGS HOUSE / GARAGE

(1) TELEPHONE 243 5839 DESCRIPTION OF WORK & INTENDED USE (2) BED ROOMS / BATH

(2) APPLICANT BRAD TYPE OF HOME PROPOSED:
 Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 _____ Other (please specify) _____

(2) ADDRESS SAME

(2) TELEPHONE SAME

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 RMF-8 Maximum coverage of lot by structures 70%

SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES NO _____
 or _____ from center of ROW, whichever is greater

Side 5' from PL, Rear 10' from PL Parking Req'mt _____

Maximum Height 35' Special Conditions _____

CENSUS 5 TRAFFIC 33 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).

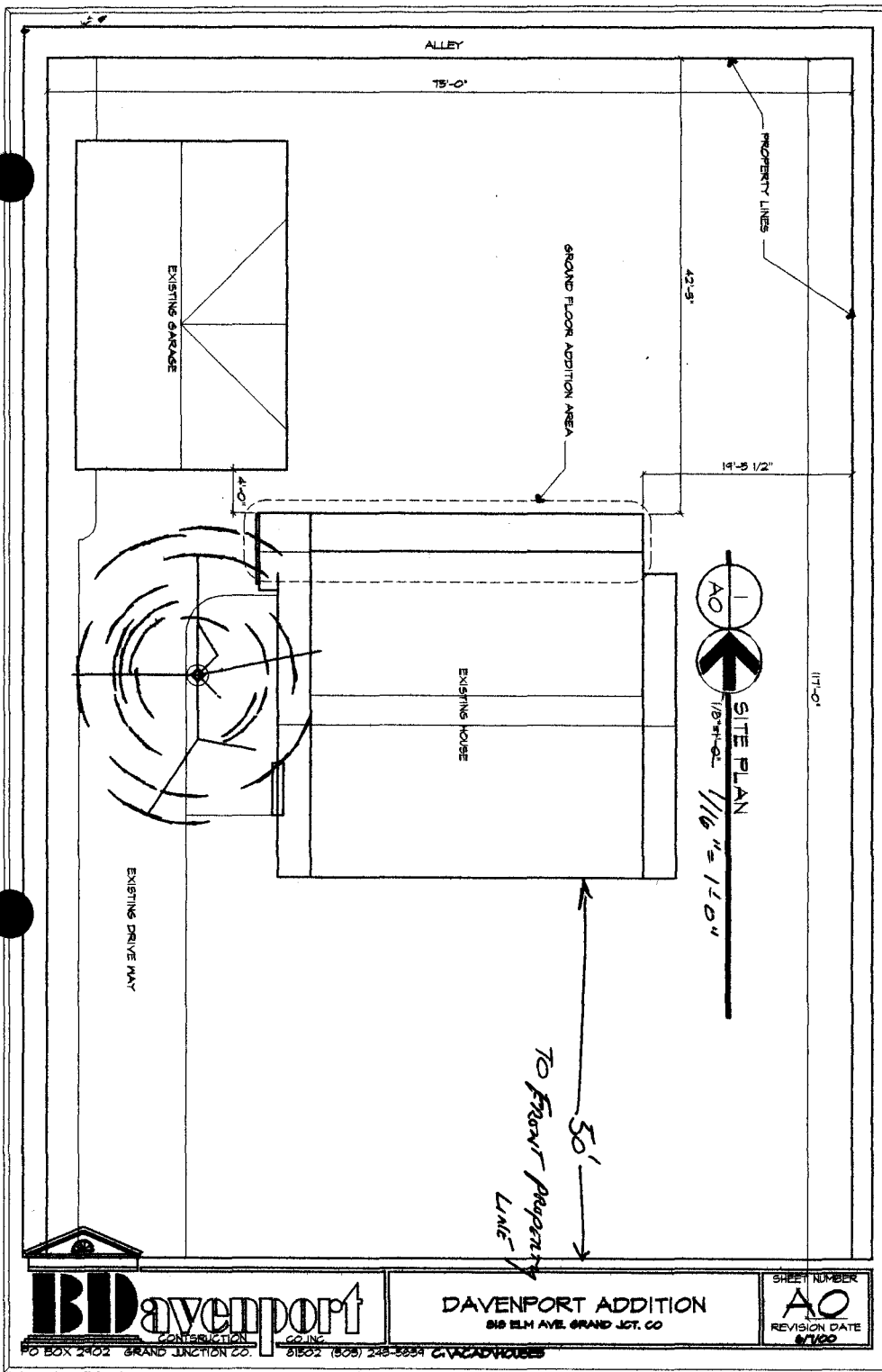
Applicant Signature [Signature] Date 6-10-00

Department Approval [Signature] Date 6/10/00

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	Existing Acct. No. <u>SFE-1200-9896-6135</u>
Utility Accounting	<u>[Signature]</u>	Date	<u>6/9/00</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)



818 Elm Ave

BD Davenport
 CONSTRUCTION CO. INC.
 PO BOX 2402 GRAND JUNCTION CO.

DAVENPORT ADDITION
 818 ELM AVE. GRAND JCT. CO.

SHEET NUMBER
AO
 REVISION DATE
 6/1/00

ACCEPTED *Mishu 6/10/00*
 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.