_	<u> </u>	
	FEE\$	10.00
	TCP \$	500.00
	SIF \$	



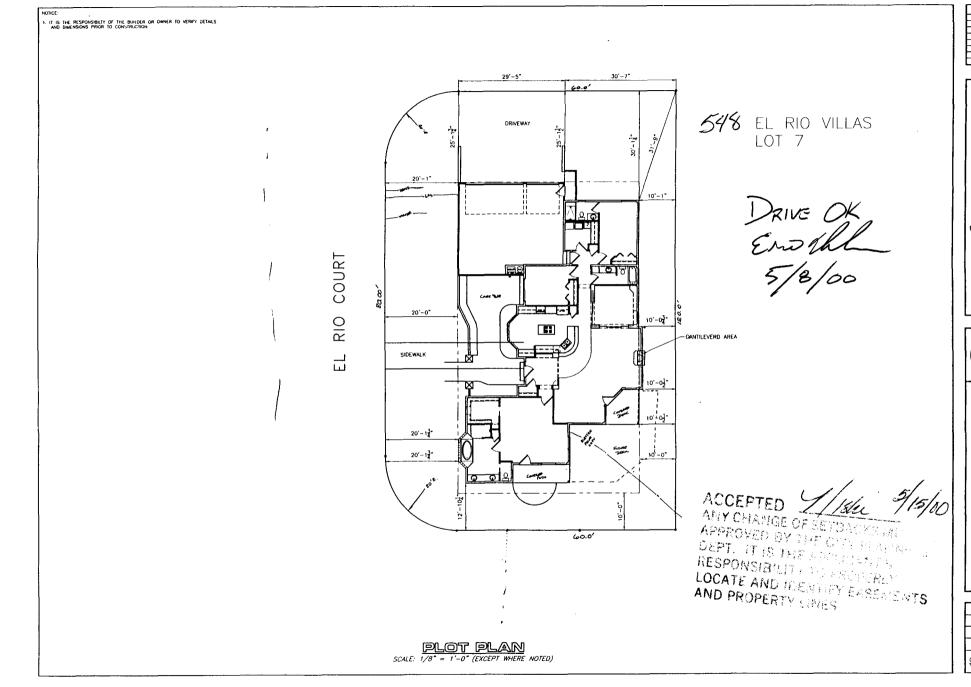
BLDG PERMIT NO. 75132

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG ADDRESS 348 EL KIO COULT	TAX SCHEDULE NO. 2945-019-23-007		
SUBDIVISION EL RO VILLAS	SQ. FT. OF PROPOSED BLDG(S)/ADDITION 2240 + 740		
FILING _ I BLK _ I LOT _ 7	SQ. FT. OF EXISTING BLDG(S)		
(1) OWNER STW ENTERPRISES (1) ADDRESS POBOX 3741 G.J.Co	NO. OF DWELLING UNITS BEFORE:O _ AFTER: THIS CONSTRUCTION NO. OF BLDGS ON PARCEL		
(1) TELEPHONE 970 242-2203	BEFORE: O AFTER: 1 THIS CONSTRUCTION		
(2) APPLICANT WILCO GNT.	USE OF EXISTING BLDGS SINGLE FAMILY RES		
(2) ADDRESS 569 S. WESTGATE DR.	DESCRIPTION OF WORK AND INTENDED USE:		
(2) TELEPHONE 970 - 242 - 2203	NEW SINGUS FAMILY RES		
REQUIRED: One plot plan, on 8 $\frac{1}{2}$ " 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.			
ZONE PLY. 7 SETBACKS: Front From property line (PL) or from center of ROW, whichever is greater Side from PL Rear from From From From From From From From F	Special Conditions		
	CENSUS 1901 TRAFFIC 90 ANNX#		
Modifications to this Planning Clearance must be approved, in writing, by the Director of 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 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 Date 5/5/00			
Department Approval I / Ishr Magur Date			
Additional water and/or sewer tap fee(s) are required: YES NO W/O No			
(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)			



REVISIONS
A
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D
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G
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AUTODRAFT

NE NAME

AUTODRAFT

NE NAME

X-X-X

XOLE

1/8" = 1'-0"

SHEET 3: