

FEE \$	10 ⁻
TCP \$	450 ⁻
SIF \$	292 ⁻

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO. 75532



Your Bridge to a Better Community

EX

3030 Flamecrest Dr.

BLDG ADDRESS 619 Round Table SQ. FT. OF PROPOSED BLDGS/ADDITION 1414 φ

TAX SCHEDULE NO. 2943-043-00-196 SQ. FT. OF EXISTING BLDGS 2

SUBDIVISION MOUNTAIN VISTA TOTAL SQ. FT. OF EXISTING & PROPOSED 1414 φ

FILING 1 BLK 2 LOT 1 NO. OF DWELLING UNITS:
 Before: 2 After: 1 this Construction

(1) OWNER Lee Homes NO. OF BUILDINGS ON PARCEL
 Before: 2 After: 1 this Construction

(1) ADDRESS 2755 N. AVE USE OF EXISTING BUILDINGS _____

(1) TELEPHONE 248-4612 DESCRIPTION OF WORK & INTENDED USE new residence

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

(2) ADDRESS 2755 N. AVE

(2) TELEPHONE 248-4612

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 RSF-4 Maximum coverage of lot by structures _____

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

Side 7' from PL, Rear 25' from PL Parking Req'mt 2

Maximum Height 35' Special Conditions Model Home to be used as a sales office until March '00

CENSUS 11 TRAFFIC 46 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 31 MAY 00

Department Approval [Signature] Date 6/2/00

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO	W/O No. <u>13142</u>
Utility Accounting <u>[Signature]</u>		Date <u>6/2/00</u>	

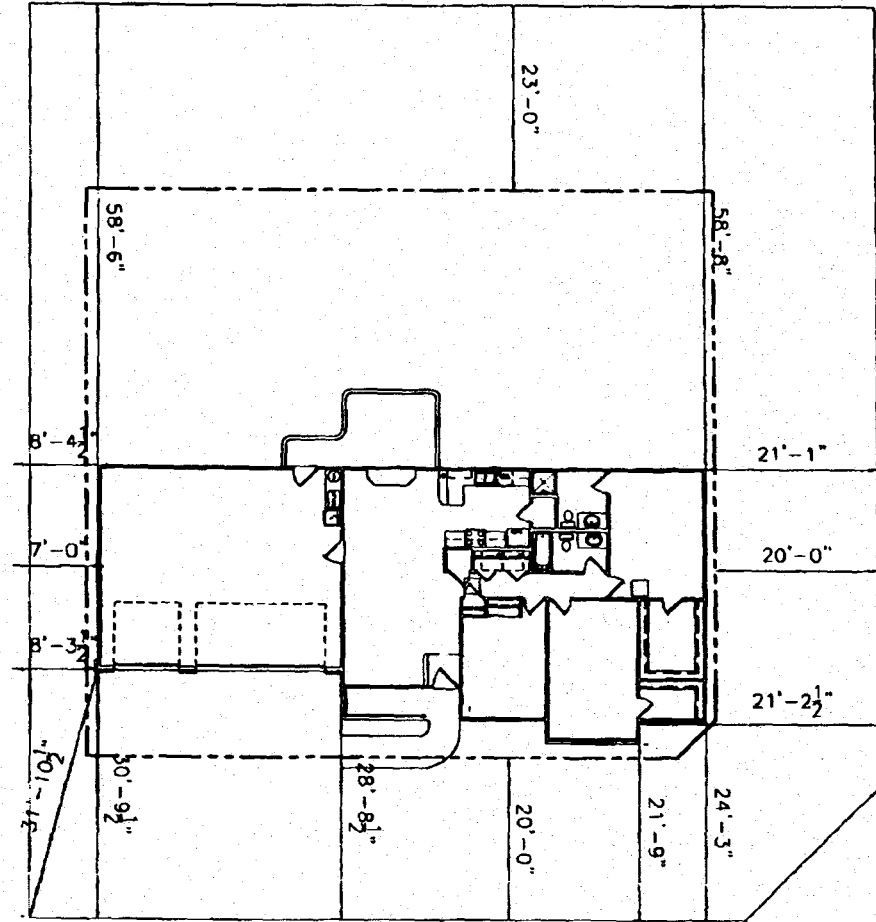
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

NOTICE:
IT IS THE RESPONSIBILITY OF THE BUYER OR OWNER TO VERIFY DETAILS
AND DIMENSIONS PRIOR TO CONSTRUCTION.

CSB

MOUNTAIN VISTA
1414 SF 3 CAR
LOT 1 - BLOCK 2



619 ROUND TABLE ROAD

DRIVE OK
EH
6/1/00

ACCEPTED
W. W. W. W.
ANY CHANGE OF SETBACKS MUST BE
APPROVED BY THE CITY ENGINEER
BEFORE ANY CONSTRUCTION BEGINS.
RESUBMIT ALL PROPOSED
LOCATE AND UTILITY EXHIBITS
AND PROPERTY LINES.

3030 FLAMECREST DRIVE