## FEE \$ 10.00 TCP \$ \_\_\_\_\_ SIF \$ 292.00

(White: Planning)

(Yellow: Customer)

## PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO. 73808



our Bridge to a Better Community

(Goldenrod: Utility Accounting)

BLDG ADDRESS 674 GEMSTONE CTB	SQ. FT. OF PROPOSED BLDGS/ADDITION
TAX SCHEDULE NO. Diamond Ridge	SQ. FT. OF EXISTING BLDGS 1503
SUBDIVISION 2945-033-00-197 K	TOTAL SQ. FT. OF EXISTING & PROPOSED 1503
FILING BLK 2 LOT 8B	NO. OF DWELLING UNITS:
OWNER RUCKMAN INC.	Before: After: this Construction  NO. OF BUILDINGS ON PARCEL
(1) ADDRESS 2520 FY2 Rd.	Before: O After: this Construction
(1) TELEPHONE 241-9196	USE OF EXISTING BUILDINGS SEN N/A
(2) APPLICANT Owner	DESCRIPTION OF WORK & INTENDED USE SFE
(2) ADDRESS	TYPE OF HOME PROPOSED:  Site Built Manufactured Home (UBC)
(2) TELEPHONE	Manufactured Home (HUD) Other (please specify)
REQUIRED: One plot plan, on 8 ½" 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 PR 4 2  SETBACKS: Front 20' from property line (PL) or from center of ROW, whichever is greater  Side 5' from PL, Rear 23' from PMaximum Height 32'	Darking Darknet 2
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 Melano Description	Date
Department Approval Lonnie Edwa	Date 2/28/00
dditional water and/or sewer tap fee(s) are required:	YES NO W/O No. 10 MOS
	110 110 110 110 110 110 110 110 110 110
Utility Accounting	Date 2-28-00

(Pink: Building Department)

