

FEE \$ <u>10.00</u>
TCP \$ _____
SIF \$ _____

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

BLDG PERMIT NO. N/A



OX

Your Bridge to a Better Community

BLDG ADDRESS <u>539 Glen Rd</u>	SQ. FT. OF PROPOSED BLDGS/ADDITION <u>537</u>
TAX SCHEDULE NO. <u>2943-073-01-064</u>	SQ. FT. OF EXISTING BLDGS <u>537 840</u>
SUBDIVISION <u>Cotton Wood Med.</u>	TOTAL SQ. FT. OF EXISTING & PROPOSED <u>1377</u>
FILING <u>-</u> BLK <u>3</u> LOT <u>1</u>	NO. OF DWELLING UNITS: Before: <u>1</u> After: <u>1</u> this Construction
(1) OWNER <u>Monard Files</u>	NO. OF BUILDINGS ON PARCEL Before: <u>1</u> After: <u>1</u> this Construction
(1) ADDRESS <u>539 Glen Rd G. Jct.</u>	USE OF EXISTING BUILDINGS <u>Residence</u>
(1) TELEPHONE <u>242-1604</u>	DESCRIPTION OF WORK & INTENDED USE <u>Deck</u>
(2) APPLICANT <u>Monard Files</u>	TYPE OF HOME PROPOSED: <input type="checkbox"/> Site Built <input type="checkbox"/> Manufactured Home (UBC) <input type="checkbox"/> Manufactured Home (HUD) <input type="checkbox"/> Other (please specify) _____
(2) ADDRESS <u>539 Glen Rd G. Jct.</u>	
(2) TELEPHONE <u>242-1604</u>	

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 <u>PD</u>	Maximum coverage of lot by structures _____
SETBACKS: Front <u>14'</u> from property line (PL) or _____ from center of ROW, whichever is greater	Permanent Foundation Required: YES _____ NO <u>X</u>
Side <u>5'</u> from PL, Rear <u>10'</u> from PL	Parking Req'mt _____
Maximum Height <u>32</u>	Special Conditions _____
	CENSUS <u>6</u> TRAFFIC <u>30</u> 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).

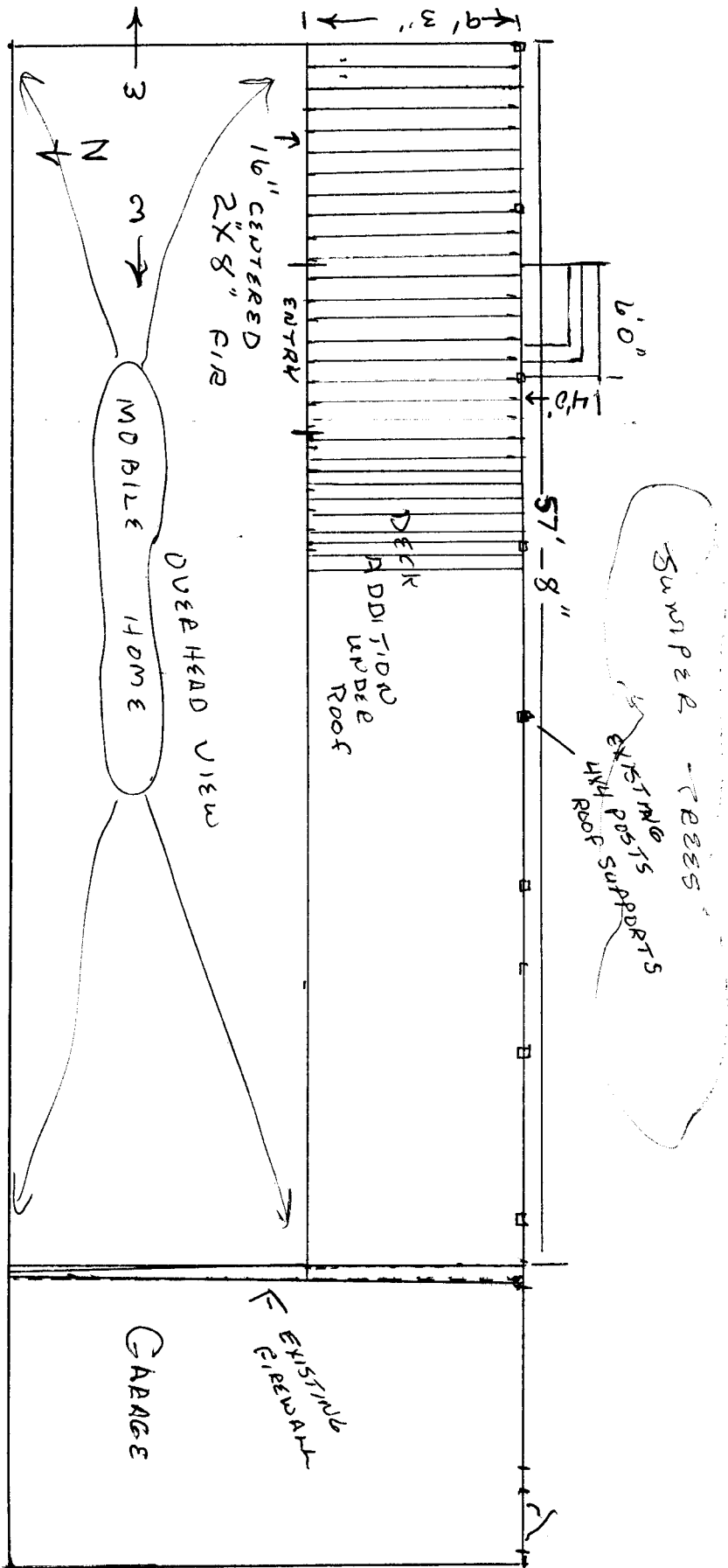
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily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

Applicant Signature <u>Monard R Files</u>	Date _____
Department Approval <u>Wishu Aragon</u>	Date <u>5/12/00</u>

Additional water and/or sewer tap fee(s) are required:	YES	NO <u>X</u>	W/O No. <u>no charge</u>
Utility Accounting <u>Della Varner</u>		Date <u>5/12/00</u>	

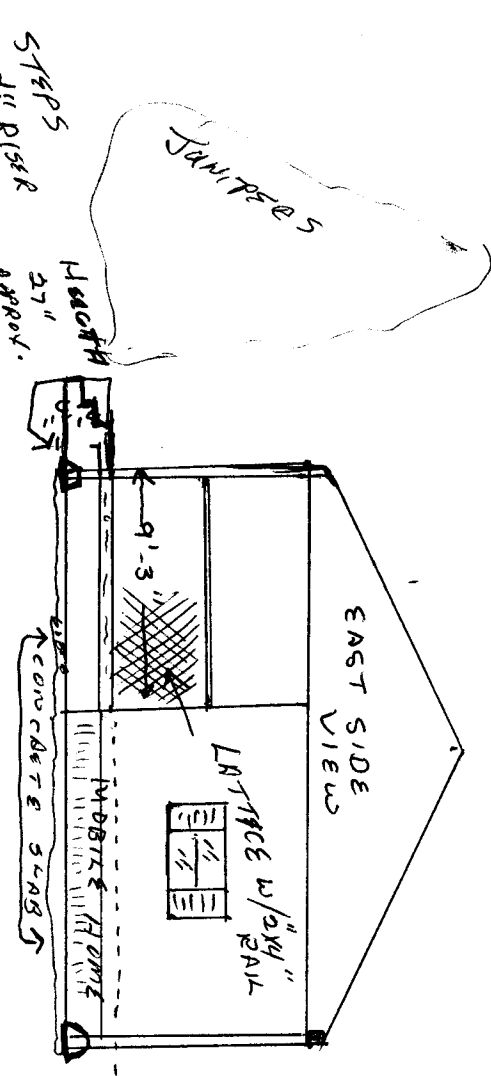
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

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



NOT TO SCALE!

Home of:
 MOWARD FILES
 539 GLEN RD.



MOBILE HOME HEIGHT

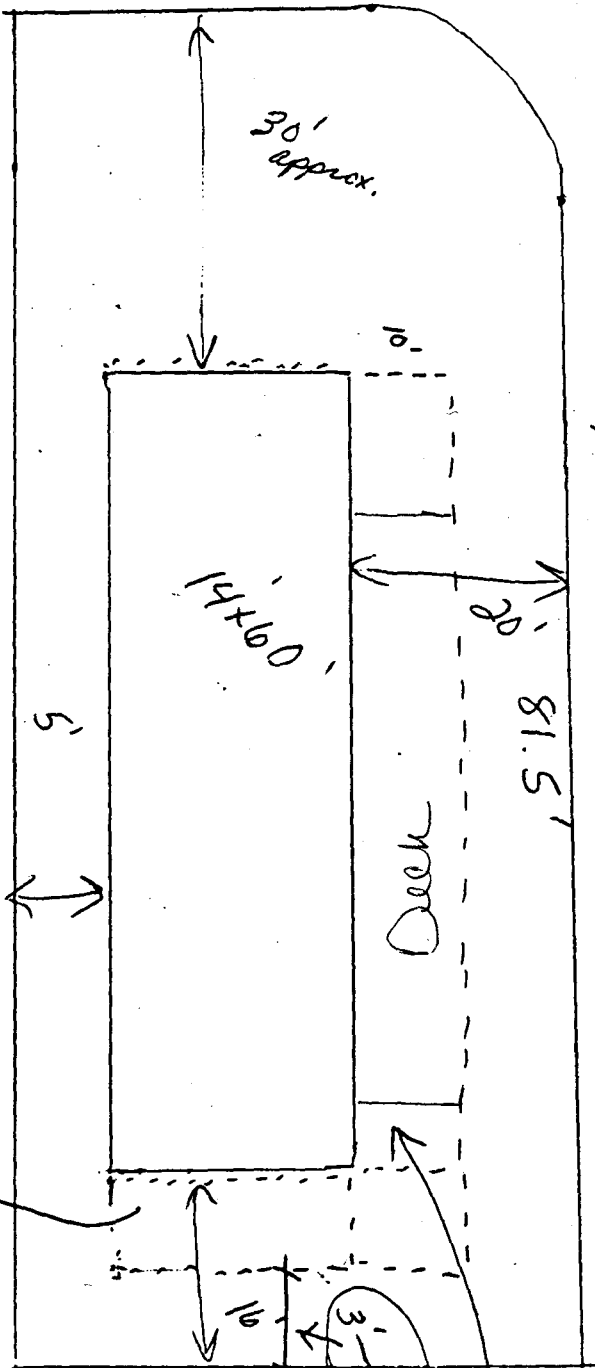
DECK TO MATCH
 MOBILE HOME FLOOR LEVEL
 SOISTS & STRAINERS 2x8 AIR
 3/4" WATER BOARD FLOORING
 4x8' SHEETS

STAIRS
 1/2" RISE
 1 1/2" TREAD

Glen Rd

24.92'

30' approx.



Meena Ave.

* FREE-
STANDING
MOBILE HOME
& CAR
COVER.

Proposed
Detached
Garage

Rollid LCA 11/18/98
Dorise 3/6/97

539 Glen Road

Yiska Oregon 5/12/00 NTS

ACCEPTED
ANY CHANGE OF SETBACKS
APPROVED BY THE CITY PLANNING
DEPT. IT IS THE APPLICANTS
RESPONSIBILITY TO PROPERLY
LOCATE AND IDENTIFY EASEMENTS
AND PROPERTY LINES.

APPLICANT'S
ADDRESS
DATE
CITY
COUNTY
STATE
ZIP
PHONE