REE \$	10.00
TCP\$	
SIF \$	292.00

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

BLDG PERMIT NO. 74815

(Single Family Residential and Accessory Structures)

Community Development Department



(Goldenrod: Utility Accounting)

_	Your Bridge to a Better Community	
BLDG ADDRESS 487 W. NIAGARA GRUE	SQ. FT. OF PROPOSED BLDGS/ADDITION	
TAX SCHEDULE NO. 2943-182-19-018	SQ. FT. OF EXISTING BLDGS	
SUBDIVISION NIAGARA VILLAGE	TOTAL SQ. FT. OF EXISTING & PROPOSED	
FILING 2 BLK / LOT 17	NO. OF DWELLING UNITS: Before: After: this Construction	
OWNER ROBERT FELLERBORN	NO. OF BUILDINGS ON PARCEL Before: After: this Construction	
(1) ADDRESS 548½ 28½ RD	USE OF EXISTING BUILDINGS	
(1) TELEPHONE 970 - 242 - 8305		
(2) APPLICANT BELL COUNTRY HOMES	DESCRIPTION OF WORK & INTENDED USE HUD MANUFACTURE HOME OF SITE	
(2) ADDRESS 2122 HWY 6450	TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC)	
(2) TELEPHONE 970~ 243-5300	Manufactured Home (HUD) Other (please specify)	
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.		
THIS SECTION TO BE COMPLETED BY CONTROL SETBACKS: Front 5' from property line (PL) or from center of ROW, whichever is greater Side 75 from PL, Rear 10' from F Maximum Height 32'		
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 Date 4-71-00		
Department Approval	Date 4-21-00	
Additional water and/or sewer tap fee(s) are required:	YES NO W/010 40	
Utility Accounting	Date 4-21-00	

(Pink: Building Department)


