FEE_\$/0TCP \$0SIF \$292	d Accessory Structures)	BLDG PERMIT NO. 76943				
		Your Bridge to a Better Community				
BLDG ADDRESS 267 PINON CT	SQ. FT. OF PROPOSED	BLDGS/ADDITION 1552				
TAX SCHEDULE NO. 2945 - 252-31-008	SQ. FT. OF EXISTING E	BLDGS				
SUBDIVISION DAUGHTER'S COVE I	TOTAL SQ. FT. OF EXIS	TING & PROPOSED 1552				
FILING BLK LOT 6	NO. OF BUILDINGS ON	this Construction				
(1) ADDRESS P.O. Box 2561, 6. 181502		this Construction				
	· · · · •	DINGS SUC. FAM. DEMO				
2 APPLICANT SAME		& INTENDED USE SOL FAM. RESIL	<u>E</u> NCE			
(2) ADDRESS L. HANSEN -	TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC) Manufactured Home (HUD)					
⁽²⁾ TELEPHONE	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.						
IN THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF 🕬						
ZONE <u>RMF-8</u>		age of lot by structures				
SETBACKS: Front $20'$ from property line (PL) or from center of ROW, whichever is greater Side from PL Rear from P	Parking Regimt	ndation Required: YES \times NO				

Maximum Height

35'

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).

Special Conditions ___

CENSUS 13 TRAFFIC D ANNX#

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	an 7. K	Janson	Date 09-15-	00			
Department Approval	SGC. Taye.	Deben	Date 9-22-0	00			
Additional water and/or	sewer tap fee(s) are require	ed: YES NO	w/9 N	\$408			
Utility Accounting	M Ca	Dat	te $9/22$	100			
VALID FOR SIX MONTHS FROM PATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)							
(White: Planning)	(Yellow: Customer)	(Pink: Building Departm	ent) (Goldenro	od: Utility Accounting)			

