FEE \$ 5.00 PLANNING CI TCP \$ (Single Family Residential ar SIF \$ Community Develop	nd Accessory Structures)	
	Your Bridge to a Better Community	
20925-13394 BLDG ADDRESS 394 Ridge CINCLEDR.	SQ. FT. OF PROPOSED BLDGS/ADDITION	
TAX SCHEDULE NO. 2945-201-05-006	SQ. FT. OF EXISTING BLDGS	
SUBDIVISION Ridges File#2	TOTAL SQ. FT. OF EXISTING & PROPOSED /258	
FILING <u>#2</u> BLK <u>12</u> LOT <u>6B</u> (1) OWNER <u>MANYOK KASTERS</u> Ken G. P.II (1) ADDRESS <u>394 Ridge Circle Dr.</u> (1) TELEPHONE <u>241 3790</u> (2) APPLICANT <u>A. derson Construction</u> (2) ADDRESS <u>485 TEJON DR. G.J.</u> (2) TELEPHONE <u>256 8944</u>	NO. OF DWELLING UNITS: Before:After:this Construction NO. OF BUILDINGS ON PARCEL Before:After:this Construction USE OF EXISTING BUILDINGS <u>Residence</u> DESCRIPTION OF WORK & INTENDED USE <u>BASement Finish</u> TYPE OF HOME PROPOSED: Site BuiltManufactured Home (UBC) Manufactured Home (HUD) Other (please specify)MA	
REQUIRED: One plot plan, on 8 ½" x 11" paper, showing	all existing & proposed structure location(s), parking, setbacks to all cation & width & all easements & rights-of-way which abut the parcel.	
THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF 10		
ZONE PR-4	Maximum coverage of lot by structures	
SETBACKS: Front from property line (PL) or from center of ROW, which ever is greater		
Side from PL, Rear from F	Parking Regimt PLFINISH Special Conditions <u>Single Family Residence Only</u>	
Maximum Height		

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 Kakut And	Date 1/3/2000
	Date 1/3/2000
Additional water and/or sewer tap fee(s) are required: YES	NO W/O No.
Utility Accounting / ans	Date /- J- 2000

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)

CENSUS 401 TRAFFIC 96 ANNX#

