

FEE \$	10.00
TCP \$	500.00
SIF \$	292.00



BLDG PERMIT NO. 74027

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

BLDG ADDRESS 417 SADDLE CT TAX SCHEDULE NO. 2945-174-36-003
 SUBDIVISION THE RIDGES AT COBBLESTONE SQ. FT. OF PROPOSED BLDG(S)/ADDITION 2618^{sq}
 FILING 1 BLK 1 LOT 11 SQ. FT. OF EXISTING BLDG(S) 0
 (1) OWNER DAVID + BEVERLY CAMPBELL NO. OF DWELLING UNITS
 BEFORE: 0 AFTER: 1 THIS CONSTRUCTION
 (1) ADDRESS 656 FANTON
 NO. OF BLDGS ON PARCEL
 BEFORE: 0 AFTER: 1 THIS CONSTRUCTION
 (1) TELEPHONE 241-1787
 (2) APPLICANT SKALTON CONST INC USE OF EXISTING BLDGS 0
 (2) ADDRESS 706 IVY PL G.D. DESCRIPTION OF WORK AND INTENDED USE: NEW
 (2) TELEPHONE 245-9008 CONSTRUCTION / RESIDENCE

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 PR-4 Maximum coverage of lot by structures _____
 SETBACKS: Front 20' from property line (PL) Parking Req'mt 2
 or _____ from center of ROW, whichever is greater
 Side 5' from PL Rear 10' from PL Special Conditions _____
 Maximum Height _____
 CENSUS 1401 TRAFFIC 96 ANN# _____

Modifications to this Planning Clearance must be approved, in writing, by the Director of 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 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 [Signature] Date 4-3-00
 Department Approval [Signature] Date 4/12/00

Additional water and/or sewer tap fee(s) are required: YES _____ NO W/O No. 13009

Utility Accounting [Signature] Date 4-12-00

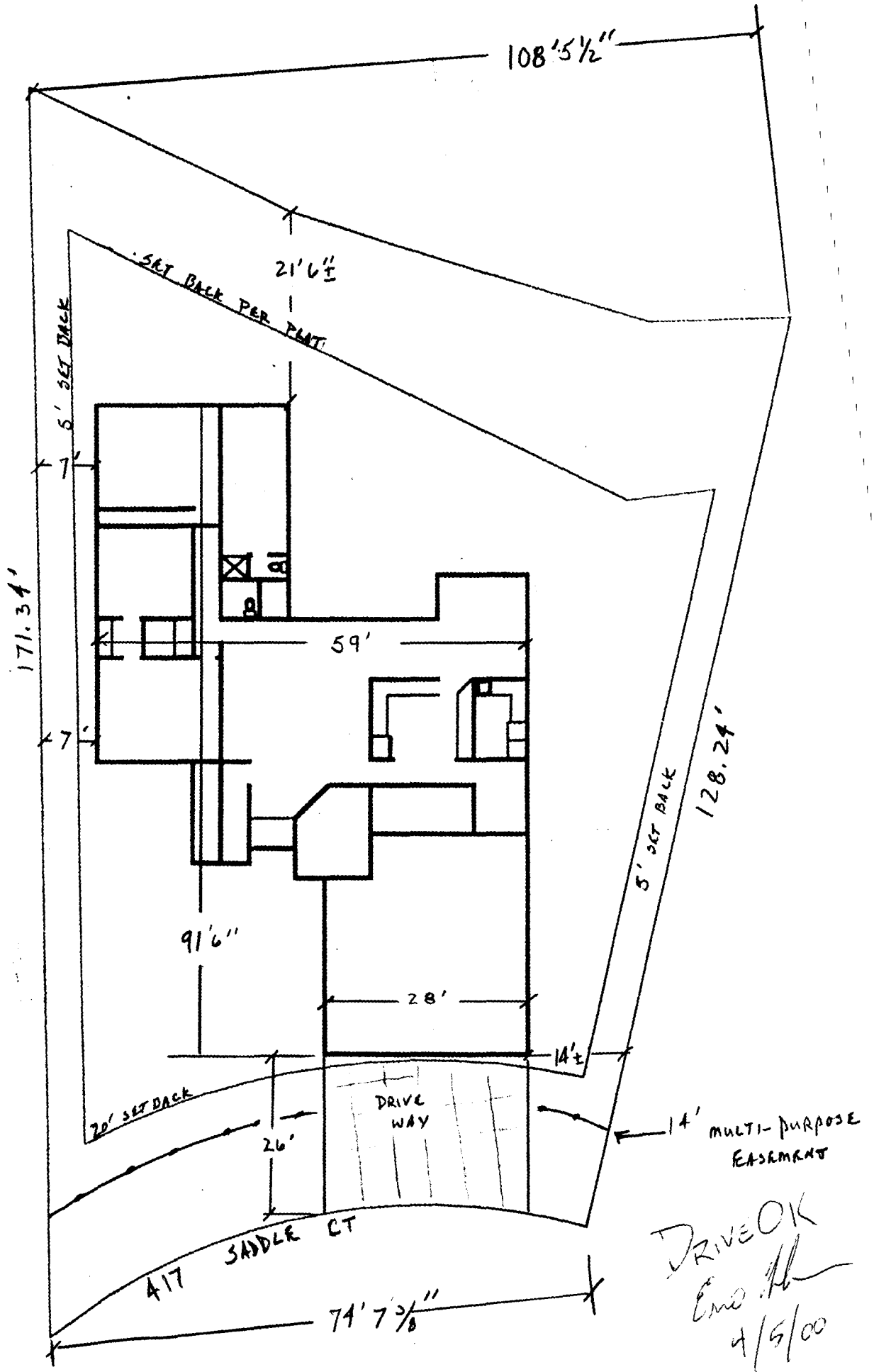
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

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

Skelton Construction, Inc.
 706 Ivy Place
 Grand Junction, CO 81506
 970-245-9008

4/19/00
 1/15/00

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



DRIVE OK
 Eric [Signature]
 4/5/00