

FEE \$	10 ⁰⁰
TCP \$	500 ⁰⁰
SIF \$	292 ⁰⁰

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

BLDG PERMIT NO. 75390



Your Bridge to a Better Community

BLDG ADDRESS 440 SEASONS DR SQ. FT. OF PROPOSED BLDGS/ADDITION 4533

TAX SCHEDULE NO. 2947-271-14-018 SQ. FT. OF EXISTING BLDGS 0

SUBDIVISION SEASONS TOTAL SQ. FT. OF EXISTING & PROPOSED 4533

FILING 5 BLK - LOT 18

(1) OWNER HARRY LONG NO. OF DWELLING UNITS:
Before: 0 After: 1 this Construction

(1) ADDRESS PO Box 2937 NO. OF BUILDINGS ON PARCEL
Before: 0 After: 1 this Construction

(1) TELEPHONE 243-5258 USE OF EXISTING BUILDINGS ~~None~~ NONE

(2) APPLICANT GREG DUFF DESCRIPTION OF WORK & INTENDED USE NEW SINGLE FAMILY RESIDENCE

(2) ADDRESS 2099 K Rd, FRUITA TYPE OF HOME PROPOSED:
 Site Built Manufactured Home (UBC)

(2) TELEPHONE 858-1490 Manufactured Home (HUD)
 Other (please specify) _____

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 PR4.4 Maximum coverage of lot by structures _____

SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES NO _____
or _____ from center of ROW, whichever is greater

Side 10' West Side from PL, Rear 10' from PL Parking Req'mt 2

Side 20' East Side from PL Special Conditions _____

Maximum Height 26' CENSUS 1401 TRAFFIC 66 ANN# _____

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 Greg Duff Date 5/30/2000

Department Approval Rita Santa J. Costello Date 5/31/2000

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/P NB <u>3135</u>
Utility Accounting	<u>Debra Vanover</u>	Date	<u>5/31/00</u>

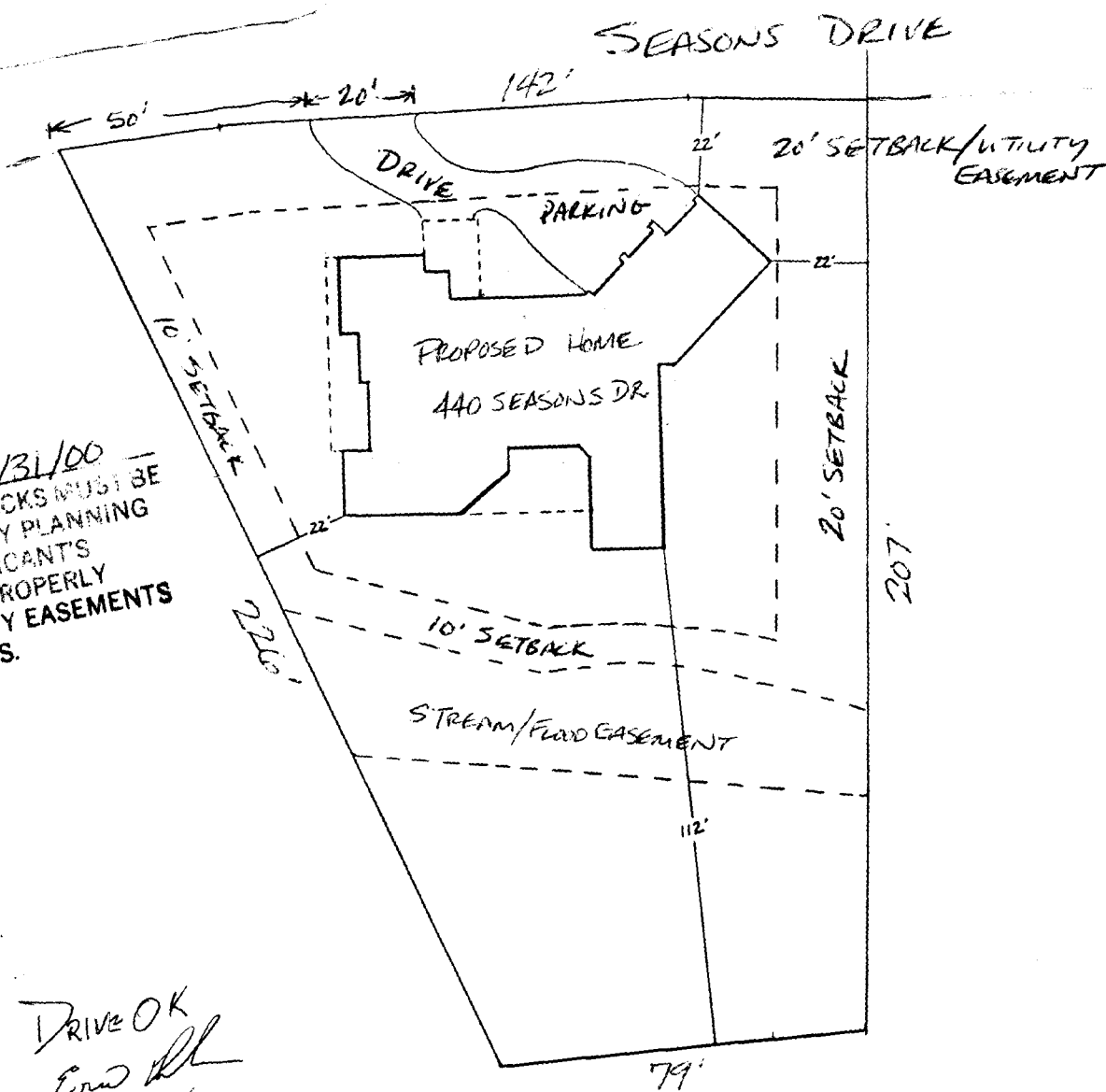
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

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

ACCEPTED SIC 5/31/00 —
ANY CHANGE OF SETBACKS MUST BE
APPROVED BY THE CITY PLANNING
DEPT. IT IS THE APPLICANT'S
RESPONSIBILITY TO PROPERLY
LOCATE AND IDENTIFY EASEMENTS
AND PROPERTY LINES.

Setbacks okay
RSH

DRIVE OK
EWD
5/30/00



440 SEASONS DR. PLOT PLAN

— LONG RESIDENCE —

GREG DUFF / AMERICAN PROPERTIES, BUILDER
858-1490