TCP\$ 500.00

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO. 76151



pX

Your Bridge to a Better Community

(Goldenrod: Utility Accounting)

BLDG ADDRESS 476 Tanker St	SQ. FT. OF PROPOSED BLDGS/ADDITION /2//
TAX SCHEDULE NO Summit View	SQ. FT. OF EXISTING BLDGS
SUBDIVISION 2943-152-72-007 L	TOTAL SQ. FT. OF EXISTING & PROPOSED /2//
FILING 2 BLK 1 LOT B OWNER Zeck & Associates	NO. OF DWELLING UNITS: Before: After: this Construction NO. OF BUILDINGS ON PARCEL Before: After: this Construction
(1) ADDRESS <u>POBOX 1083</u>	USE OF EXISTING BUILDINGS
(1) TELEPHONE <u>257-9483</u>	DESCRIPTION OF WORK & INTENDED USE NEW home
(2) APPLICANT	
(2) ADDRESS	TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC) Manufactured Home (HUD) 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.	
THIS SECTION TO BE COMPLETED BY CONTROL ROW, F-5 SETBACKS: Front Of from property line (PL) or from center of ROW, whichever is greater Side Side From PL, Rear 25' from PL Maximum Height 35'	Parking Regimt
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	
Department Approval	$\frac{1}{2}$ Date $\frac{1-27-00}{2}$ Date $\frac{7/27/00}{2}$
Additional water and/or sewer tap fee(s) are required:	Show Date 7/27/00 YES NO W/O No. See attached
Additional water and/or sewer tap fee(s) are required: Utility Accounting	Show Date 7/27/00 YES NO WONO See attached

(Pink: Building Department)

