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FEE \$ 10.00PLANNING CITCP \$ -O-(Single Family Residential and Community Develop)SIF \$ 292.00Community Develop)	nd Accessory Structures)			
BLDG ADDRESS 2679 Applement Pl.	SQ. FT. OF PROPOSED BLDGS/ADDITION _203/			
TAX SCHEDULE NO. 2945-011-04-006	SQ. FT. OF EXISTING BLDGS			
SUBDIVISION Apple Blistin Heights	TOTAL SQ. FT. OF EXISTING & PROPOSED 2031			
FILING BLK LOT (1) OWNER <u>LEO</u> <u>WARREN</u> (1) ADDRESS <u>2554</u> <u>MAUREUN</u> <u>CT</u> (1) TELEPHONE <u>Z43 - 0867</u> (2) APPLICANT <u>MARVIN E. OLJON</u> (2) ADDRESS <u>406</u> <u>MIRADA (T.</u> (2) TELEPHONE <u>256-7283</u> BEOLUBED: One plate plan on 8 1/1" × 11" paper a houring	NO. OF DWELLING UNITS: Before: After: this Construction NO. OF BUILDINGS ON PARCEL Before: After: this Construction USE OF EXISTING BUILDINGS O DESCRIPTION OF WORK & INTENDED USE Active O DESCRIPTION OF WORK & INTENDED USE Active O TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC) 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.				
ZONE <u>$RSF-4$</u> SETBACKS: Front <u>$20'$</u> from property line (PL) or from center of ROW, whichever is greater Side <u>$1'$</u> from PL, Rear <u>$25'$</u> from P Maximum Height <u>$35'$</u>	Parking Req'mt			

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	Date 10-19-01
Department Approval C, Laye Lubson	Date 10 23 01
Additional water and/or sewer tap fee(s) are required: YES	NO W/0 No4330
Utility Accounting Lotte Vanauer	Date(O/23/0)

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)
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