

FEE \$ <u>0</u>
TCP \$ <u>0</u>
SIF \$ <u>292</u>

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

BLDG PERMIT NO. 80043



Your Bridge to a Better Community

BLDG ADDRESS 237 Arlington Dr. SQ. FT. OF PROPOSED BLDGS/ADDITION 1,436 sf. house
547 sf. garage

TAX SCHEDULE NO. 2943-303-66-003 SQ. FT. OF EXISTING BLDGS -NA-

SUBDIVISION Arrowhead Acres II TOTAL SQ. FT. OF EXISTING & PROPOSED 1,436 sf. house
547 sf. garage

FILING 2 BLK 5 LOT 2 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER HW Grace NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS 518 28 Road Suite A107 USE OF EXISTING BUILDINGS -NA-
C.S. CO 81501

(1) TELEPHONE 241-6646 DESCRIPTION OF WORK & INTENDED USE New Home Const.

(2) APPLICANT HW Grace TYPE OF HOME PROPOSED:
 Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify) _____

(2) ADDRESS 518 28 Rd Ste. A107
C.S. CO 81501

(2) TELEPHONE 241-6646

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 RSF-5 Maximum coverage of lot by structures 60%

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

Side 5' from PL, Rear 25' from PL Parking Req'mt 2

Maximum Height 35' Special Conditions _____

CENSUS 13 TRAFFIC 84 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 Paul Derby Date 5/30/01

Department Approval [Signature] Date 5/30/01

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	WHO'S PAID <u>paid @ DMSD</u>
Utility Accounting <u>[Signature]</u>		Date <u>5/30/01</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)

