| FEE \$ ./0 · 00 |
|-----------------|
| TCP\$           |
| SIF \$ 292 00   |

## **PLANNING CLEARANCE**

BLDG PERMIT NO. 7912U

(Single Family Residential and Accessory Structures)

Community Development Department



BLDG ADDRESS 663 CROSSING ST SQ. FT. OF PROPOSED BLDGS/ADDITION 1196 4 TAX SCHEDULE NO. 7945-037-00-166 SQ. FT. OF EXISTING BLDGS TOTAL SQ. FT. OF EXISTING & PROPOSED (196 NO. OF DWELLING UNITS: Before: After: this Construction (1) OWNER NO. OF BUILDINGS ON PARCEL Before: O After: I this Construction USE OF EXISTING BUILDINGS (1) TELEPHONE DESCRIPTION OF WORK & INTENDED USE WELL MOSIBLE (2) APPLICANT TYPE OF HOME PROPOSED: (2) ADDRESS \_\_\_\_ Site Built \_\_\_\_\_ Manufactured Home (UBC) \_\_\_ Manufactured Home (HUD) (2) TELEPHONE \_\_\_\_ 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 \_\_\_ RMF-8 Maximum coverage of lot by structures SETBACKS: Front \_\_\_\_\_\_\_\_ from property line (PL) Permanent Foundation Required: YES X or from center of ROW, whichever is greater Parking Reg'mt Side 5' from PL, Rear 10' from PL Special Conditions 610 tech Le Maximum Height CENSUS /0 TRAFFIC /9 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 NO Additional water and/or sewer tap fee(s) are required: W/O No. 1 **Utility Accounting** Date

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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Feb-26-01 10:30AM;

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gent By: Bray and Co;