FEE \$ 10.00
TCP\$ -0-
015 0 - 0 -

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO.	N	A





(Goldenrod: Utility Accounting)

BLDG ADDRESS 3114 034 C+	SQ. FT. OF PROPOSED BLDGS/ADDITION 80
TAX SCHEDULE NO. 2943-152-70-018	SQ. FT. OF EXISTING BLDGS 1134
SUBDIVISION <u>Summity View Ranch</u>	TOTAL SQ. FT. OF EXISTING & PROPOSED 1214
FILING 2 BLK 3 LOT 6	NO. OF DWELLING UNITS: Before: After: this Construction
(1) OWNER <u>Clayton</u> a Weesc	NO. OF BUILDINGS ON PARCEL Before: After: this Construction
(1) ADDRESS 3/14 03/4 C+	
(1) TELEPHONE (970) -434-1544	USE OF EXISTING BUILDINGS # House
(2) APPLICANT	DESCRIPTION OF WORK & INTENDED USE Storage Shed
(2) ADDRESS	TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC) Manufactured Home (HUD)
(2) TELEPHONE	
property lines, ingress/egress to the property, driveway lo	all existing & proposed structure location(s), parking, setbacks to all cation & width & all easements & rights-of-way which abut the parcel.
	OMMUNITY DEVELOPMENT DEPARTMENT STAFF 🐿
ZONE RMF-S	Maximum coverage of lot by structures
SETBACKS: Front <u>25'</u> from property line (PL) or from center of ROW, whichever is greater	Permanent Foundation Required: YESNO
Side 39 from PL, Rear 5' from P	Parking Req'mt
	Special Conditions
Maximum Height 35'	CENSUS 8 TRAFFIC 58 ANNX#
	ved, in writing, by the Community Development Department. The ied until a final inspection has been completed and a Certificate of g Department (Section 305, Uniform Building Code).
ordinances, laws, regulations or restrictions which apply to action, which may include but not necessarily be limited	the information is correct; I agree to comply with any and all codes, to the project. I understand that failure to comply shall result in legal to non-use of the building(s).
Applicant Signature Clayter C. Weese	Date 10 - 15 - 0/
Applicant Signature <u>Charter Cr Weese</u> Department Approval <u>Harfley</u> Henderson	Date 10-15-01
Additional water and/or sewer tap fee(s) are required:	YES NO. W/O NO.) 100 1 2 106()
Utility Accounting Volta Globerry	Date 1015 01
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE	

(Pink: Building Department)

