

FEE \$	10.00
TCP* \$	500 -
SIF \$	292. -

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

BLDG PERMIT NO. 78200



Your Bridge to a Better Community

BLDG ADDRESS 2811 ELORA CT. SQ. FT. OF PROPOSED BLDGS/ADDITION 1960

TAX SCHEDULE NO. 2943-062-34-002 SQ. FT. OF EXISTING BLDGS N/A

SUBDIVISION GRAND VIEW SUBDIVISION TOTAL SQ. FT. OF EXISTING & PROPOSED 1960

FILING 4 BLK 2 LOT 2 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER SKELTON CONSTRUCTION INC NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS PO Box 4247 USE OF EXISTING BUILDINGS 0

(1) TELEPHONE 245-9008 DESCRIPTION OF WORK & INTENDED USE New Home

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

(2) ADDRESS PO Box 4247

(2) TELEPHONE 245-9008

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-5 Maximum coverage of lot by structures 0090

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

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

Maximum Height 35' Special Conditions _____

CENSUS 10 TRAFFIC 22 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 [Signature] Date 1/4/01

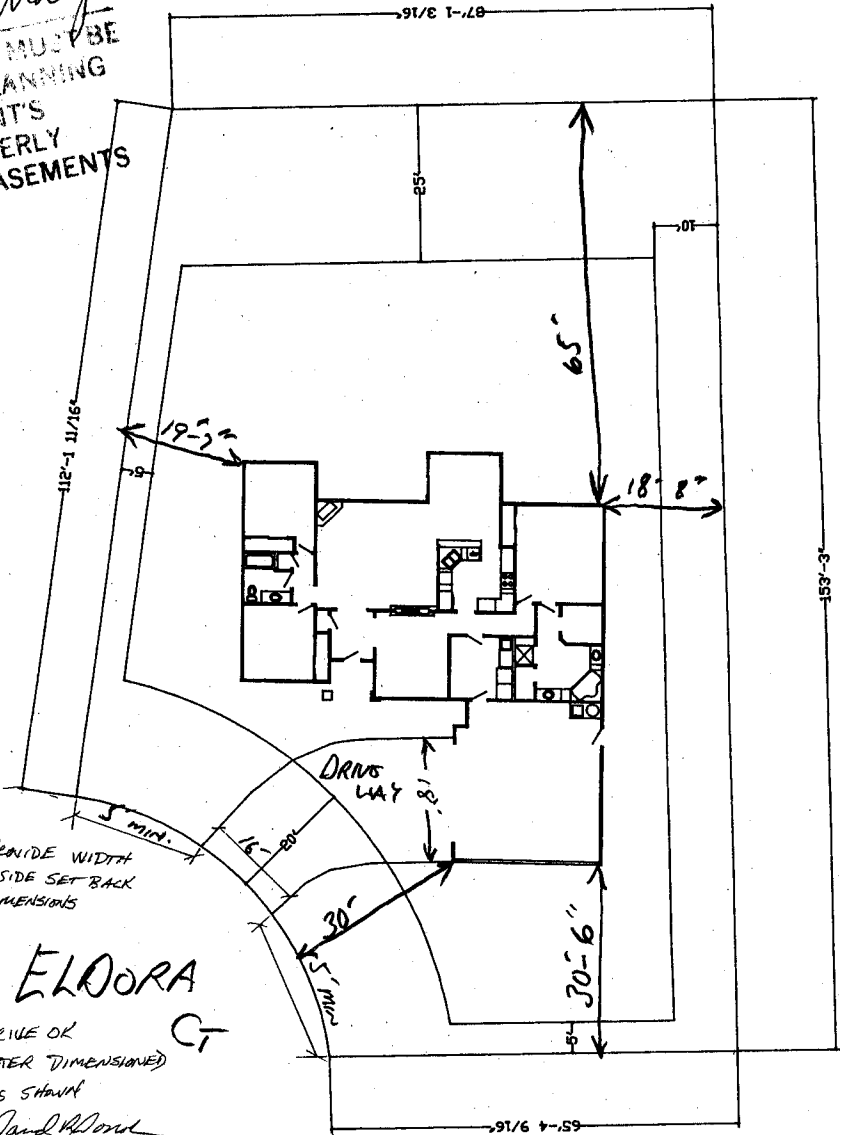
Department Approval [Signature] Date 1/4/01

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>13014</u>
Utility Accounting <u>[Signature]</u>			Date <u>1/4/01</u>

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

ACCEPTED
 ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.

Alise Aragon - 1/5/01



PROVIDE WIDTH & SIDE SETBACK DIMENSIONS

ELDORA CT

DRIVE OK AFTER DIMENSIONED AS SHOWN
David Johnson
 1/2/2001
 DEVT ENG.

ACCEPTED
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1/4/01
C. Faye Johnson