TCP \$ 10.00

PLANNING CLEARANCE

BLDG PERMIT NO. 8/657

(Single Family Residential and Accessory Structures)

Community Development Department

W.



BLDG ADDRESS 2530 Falls View Circle	SQ. FT. OF PROPOSED BLDGS/ADDITION 257 SF
TAX SCHEDULE NO. 2945-032-54-004	SQ. FT. OF EXISTING BLDGS
SUBDIVISION Moon Radge Palls - 4	TOTAL SQ. FT. OF EXISTING & PROPOSED 26575F
FILING 4 BLK / LOT 4	NO. OF DWELLING UNITS: Before:/ After:/ this Construction
(1) OWNER Terry Lawrence	NO. OF BUILDINGS ON PARCEL Before:/ After:/ this Construction
(1) ADDRESS 2530 Falls View (ircl-	USE OF EXISTING BUILDINGS Room addition
(1) TELEPHONE <u>\$23-5555</u>	DESCRIPTION OF WORK & INTENDED USE Library
(2) APPLICANT Terry Caurence	TYPE OF HOME PROPOSED.
(2) ADDRESS 2530 Falls View Circl-	Site Built Manufactured Home (UBC) Manufactured Home (HUD)
(2) TELEPHONE <u>523-5555</u>	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.	
** THIS SECTION TO BE COMPLETED BY CO	OMMUNITY DEVELOPMENT DEPARTMENT STAFF 🐿
ZONE ρD	Maximum coverage of lot by structures
SETBACKS: Front <u>30</u> from property line (PL) or from center of ROW, whichever is greater	Permanent Foundation Required: YES_X_NO
Side from PL, Rear 20 ' from P	Parking Req'mtL
Maximum Height	Special Conditions
Waximum Height	CENSUS <u>ID</u> TRAFFIC <u>19</u> ANNX#
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).	
	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	Date Sept 20, 2001
Department Approval Hully	9/2/0) Date 9 2/0)
Additional water and/or sewer tap fee(s) are required:	YES NO WO NO. No dy
Utility Accounting	9 Data/125/0/

