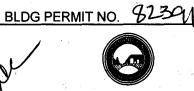
FEE\$	10.00
TCP\$	Ø
SIF \$	Ø

(White: Planning)

(Yellow: Customer)

## **PLANNING CLEARANCE**

(Single Family Residential and Accessory Structures) Community Development Department



Your Bridge to a Better Community

(Goldenrod: Utility Accounting)

BLDG ADDRESS 1036 HORRON DR. #22	SQ. FT. OF PROPOSED BLDGS/ADDITION	
•	7sq. ft. of existing bldgs	
	TOTAL SQ. FT. OF EXISTING & PROPOSED	
<u> </u>	NO. OF DWELLING UNITS:  Before: After: this Construction	
(1) OWNER VINEN GRAZE	NO. OF BUILDINGS ON PARCEL  Before: this Construction	
(1) ADDRESS 636 HORIZON DR. # 802	USE OF EXISTING BUILDINGS Townhomes	
(1) TELEPHONE <u>345-436/</u>	DESCRIPTION OF WORK & INTENDED USE <u>Rebuild Okisting</u> 2	
(2) APPLICANT MESS PROPERTY SERVICE	TYPE OF HOME PROPOSED: (NO DIMENSION CHANGE)	
(2) ADDRESS P.O. BOX 3031 GRAND GEN.	Site Built Manufactured Home (UBC)	
(2) TELEPHONE 255-0775	Manufactured Home (HUD) 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 C	OMMUNITY DEVELOPMENT DEPARTMENT STAFF 🚳	
ZONE PD	Maximum coverage of lot by structures	
SETBACKS: Front from property line (PL)	Permanent Foundation Required: YESNO	
or from center of ROW, whichever is greater  Side from PL, Rear from F	Parking Req'mt	
Sidefrom PL, /Rearfrom F	Special Conditions Quisting - Mo	
Maximum Height	CENSUS 10 TRAFFIC 32 ANNX#	
	oved, in writing, by the Community Development Department. The bied until a final inspection has been completed and a Certificate of the 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	
Department Approval C. Haye July	Date 11/10/01	
Additional water and/or sewer tap fee(s) are required:	YES NO W/O No.	
Utility Accounting (Bensley	Date ////////	
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE	(Section 2.2.C.1.c(1) Grand Junction Zoning & Development Code)	

(Pink: Building Department)