

FEE \$ <u>10.00</u>
TCP \$
SIF \$

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

BLDG PERMIT NO. 80458



Your Bridge to a Better Community

18377-11793

BLDG ADDRESS 1609 Hwy 50 #9 SQ. FT. OF PROPOSED BLDGS/ADDITION 1064

TAX SCHEDULE NO. 2945-262-00-024 SQ. FT. OF EXISTING BLDGS 0

SUBDIVISION Green Acres TOTAL SQ. FT. OF EXISTING & PROPOSED 1064

FILING _____ BLK _____ LOT _____ NO. OF DWELLING UNITS:

(1) OWNER Renee Gideon Before: 1 After: _____ this Construction

(1) ADDRESS 1609 Hwy 50 #9 NO. OF BUILDINGS ON PARCEL

(1) TELEPHONE 245-2005 Before: _____ After: _____ this Construction

(2) APPLICANT Same USE OF EXISTING BUILDINGS Single Family Dwelling

(2) ADDRESS _____ DESCRIPTION OF WORK & INTENDED USE utilities connections

(2) TELEPHONE _____ TYPE OF HOME PROPOSED:

- Site Built Manufactured Home (UBC)
- Manufactured Home (HUD)
- Other (please specify) mobile home pre-hud

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 PD Maximum coverage of lot by structures _____

SETBACKS: Front _____ from property line (PL) Permanent Foundation Required: YES _____ NO X

or _____ from center of ROW, whichever is greater Parking Req'mt _____

Side from PL Rear _____ from PL Special Conditions _____

Maximum Height _____ CENSUS 13 TRAFFIC 87 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 Renee Gideon Date _____

Department Approval Misha Magon Date 6/26/01

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	NO No. <u>Replace Existing</u>
Utility Accounting <u>Dottie Kanover</u>	Date <u>6-26-01</u>		

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)