FEE \$ 10.00 TCP \$ 198.00 SIF \$ 292.00

(White: Planning)

(Yellow: Customer)

## **PLANNING CLEARANCE**

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO. \$1890





(Goldenrod: Utility Accounting)

| BLDG ADDRESS 2494 SATARLOCHAN CT  | SQ. FT. OF PROPOSED BLDGS/ADDITION   |
|---|--|
| TAX SCHEDULE NO. 2701 - 334 - 31 - 001  | SQ. FT. OF EXISTING BLDGS  |
| SUBDIVISION FOUNTAIN GREENS   | TOTAL SQ. FT. OF EXISTING & PROPOSED 1248 <sup>n</sup>   |
| FILING BLK LOT  | NO. OF DWELLING UNITS:  Before: After: _ / this Construction  NO. OF BUILDINGS ON PARCEL  Before: After: this Construction |
| (1) ADDRESS 131 N 674 5T SWITE 301  (1) TELEPHONE 241-1.710  (2) APPLICANT SKELTON CONSTRUCTION  (2) ADDRESS PO BOX 4247  (2) TELEPHONE 245-9008 / 250-7055   | DESCRIPTION OF WORK & INTENDED USE   |
| 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  ZONE  SETBACKS: Front 15' (20'forgarage) from property line (PL) or from center of ROW, whichever is greater  Side 5' from PL, Rear from P  Maximum Height 32'  | Parking Req'mt _ 2   |
| 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, |  |
|   | o the project. I understand that failure to comply shall result in legal   |
| Applicant Signature Shared  | Date   |
| Department Approval Hayleen Handerson   | Oate 10-11-01  |
| Additional water and/or sewer tap fee(s) are required:  |  |
|   | YES NO W/9 No. t 317   |
| Utility Accounting Chief and  | YES NO W/9 No.1 3 1 7  Date O-(/-O/ (Section 9.3.20 Grand Junction Zoning & Dayslanment Code)                              |

(Pink: Building Department)

