

FEE \$	10.00
TCP \$	0
SIF \$	0

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO. 82982



Your Bridge to a Better Community

15892-10134

BLDG ADDRESS 351 Northridge Dr SQ. FT. OF PROPOSED BLDGS/ADDITION 300

TAX SCHEDULE NO. 2945-023-19-011 SQ. FT. OF EXISTING BLDGS 2500

SUBDIVISION Northridge Estates TOTAL SQ. FT. OF EXISTING & PROPOSED 2600

FILING _____ BLK 4 LOT 11

(1) OWNER David Summers

(1) ADDRESS _____

(1) TELEPHONE 970 242-2125

(2) APPLICANT David Summers

(2) ADDRESS _____

(2) TELEPHONE _____

NO. OF DWELLING UNITS:
Before: _____ After: _____ this Construction

NO. OF BUILDINGS ON PARCEL
Before: _____ After: _____ this Construction

USE OF EXISTING BUILDINGS Bath & Closet

DESCRIPTION OF WORK & INTENDED USE Bath & Closet

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

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 RSF-4

Maximum coverage of lot by structures 50%

SETBACKS: Front 20' from property line (PL)
or _____ from center of ROW, whichever is greater

Permanent Foundation Required: YES _____ NO _____

Side 7 from PL, Rear 25 from PL

Parking Req'mt _____

Maximum Height 35

Special Conditions _____

CENSUS _____ TRAFFIC _____ ANNEX# _____

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 1/15/02

Department Approval [Signature] Date 1/15/02

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No.
Utility Accounting	<u>Kate Elsberry</u>		Date <u>1/15/02</u>

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-362C Grand Junction Zoning & Development Code)

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)