| FEE\$ | io |
|-------|-----|
| TCP\$ | 500 |
| SIF\$ | 292 |
| | 800 |

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

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|---------------|--|

BLDG PERMIT NO.



Your Bridge to a Better Community

(Goldenrod: Utility Accounting)

| BLDG ADDRESS 3550 PLAZZA WAY | SQ. FT. OF PROPOSED BLDGS/ADDITION 2720 |
|---|--|
| TAX SCHEDULE NO. NEW FILE 2945-1 | SQ. FT. OF PROPOSED BLDGS/ADDITION 2720 1 SQ. FT. OF EXISTING BLDGS |
| SUBDIVISION THE KNOLLS | TOTAL SQ. FT. OF EXISTING & PROPOSED 2720 |
| FILING 4 BLK 4 LOT 1 (1) OWNER MONUMENT HOMES (1) ADDRESS 759 HORIZON DEIVE (1) TELEPHONE Z34-7780 (2) APPLICANT MONUMENT HOMES | NO. OF DWELLING UNITS: Before: |
| (2) ADDRESS 759 HORIZON DEIVE (2) TELEPHONE 234-7700 | Site Built Manufactured Home (UBC) Manufactured Home (HUD) Other (please specify) |
| REQUIRED: One plot plan, on 8 ½" x 11" paper, showing property lines, ingress/egress to the property, driveway lo | all existing & proposed structure location(s), parking, setbacks to all cation & width & all easements & rights-of-way which abut the parcel. OMMUNITY DEVELOPMENT DEPARTMENT STAFF |
| ZONE PD | Maximum coverage of lot by structures <u>35%</u> |
| SETBACKS: Front 20 from property line (PL) or from center of ROW, whichever is greater Side from PL, Rear 20 from F Maximum Height 32 | Permanent Foundation Required: YES X NO Parking Reg'mt |
| structure authorized by this application cannot be occup Occupancy has been issued, if applicable, by the Buildin | oved, in writing, by the Community Development Department. The bied until a final inspection has been completed and a Certificate of an Department (Section 305, Uniform Building Code). If the information is correct; I agree to comply with any and all codes, |
| ordinances, laws, regulations or restrictions which apply action, which may include but not necessarily be limited | to the project. I understand that failure to comply shall result in legal to non-use of the building(s). |
| Applicant Signature | Date UNC (5, 700) |
| Department Approval Comple Thurs | Date 6/25/01 |
| Additional water and/or sewer tap fee(s) are required: | YES NO W/O No. 14073 |
| Utility Accounting A Beux | 2ley Date 4/25/01 |
| VALID FOR SIX MONTHS EDOM DATE OF ISSUANCE | E (Section 9-3-2C Grand Junction Zoning & Development Code) |

(Pink: Building Department)

