FEE\$	10	,00
TCP\$243.20		

PLANNING CLEARANCE

XU 735 **BLDG PERMIT NO**

(Single Family Residential and Accessory Structures)



Community Development Department 8545 QU Your Bridge to a Better Communit SQ. FT. OF PROPOSED BLDGS/ADDITION 1415= how BLDG ADDRESS 2842 SQ. FT. OF EXISTING BLDGS TAX SCHEDULE NO TOTAL SQ. FT. OF EXISTING & PROPOSED SUBDIVISION Arrowhead 10 NO. OF DWELLING UNITS: Before: _____ After: __ this Construction (1) OWNER NO. OF BUILDINGS ON PARCEL Before: After: this Construction (1) ADDRESS **USE OF EXISTING BUILDINGS** (1) TELEPHONE DESCRIPTION OF WORK & INTENDED USE WWW. OME (2) APPLICANT TYPE OF HOME PROPOSED: (2) ADDRESS Site Built Manufactured Home (UBC) Manufactured Home (HUD) (2) TELEPHONE 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 🖘 RMF-S Maximum coverage of lot by structures SETBACKS: Front 20 from property line (PL) or ____ from center of ROW, whichever is greater Permanent Foundation Required: YES X NO Parking Reg'mt 5 from PL, Rear 25 from PL Special Conditions Maximum Height census 13 traffic 84 annx# 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 / < // Department Approval Date W/O No. Additional water and/or sewer tap fee(s) are required: YES NO

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

(White: Planning)

Utility Accounting

(Yellow: Customer)

(Pink: Building Department)

Date

(Goldenrod: Utility Accounting)

