

FEE \$	10.00
TCP \$	500.00
SIF \$	292.00

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. 83877



Your Bridge to a Better Community

BLDG ADDRESS 400A Broken Arrow SQ. FT. OF PROPOSED BLDGS/ADDITION 1265

TAX SCHEDULE NO. 2943-174-200-001 SQ. FT. OF EXISTING BLDGS 1265

SUBDIVISION FLINT RIDGE TOTAL SQ. FT. OF EXISTING & PROPOSED _____

FILING 1 BLK 2 LOT 01 NO. OF DWELLING UNITS:
 Before: 1 After: _____ this Construction

(1) OWNER TML ENTERPRISES INC NO. OF BUILDINGS ON PARCEL
 Before: _____ After: _____ this Construction

(1) ADDRESS Box 2569, GRJTCO USE OF EXISTING BUILDINGS SINGLE FAMILY

(1) TELEPHONE 201-8022 DESCRIPTION OF WORK & INTENDED USE SINGLE FAMILY

(2) APPLICANT TML ENTERPRISES INC TYPE OF HOME PROPOSED:
 Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 _____ Other (please specify) _____

(2) ADDRESS Box 2569, GRJTCO

(2) TELEPHONE 201-8022

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 RMF-8 Maximum coverage of lot by structures 70%

SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES NO _____
 or _____ from center of ROW, whichever is greater

Side 5' from PL, Rear 10' from PL Parking Req't 2

Maximum Height 35' Special Conditions _____

CENSUS 8 TRAFFIC 56 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).

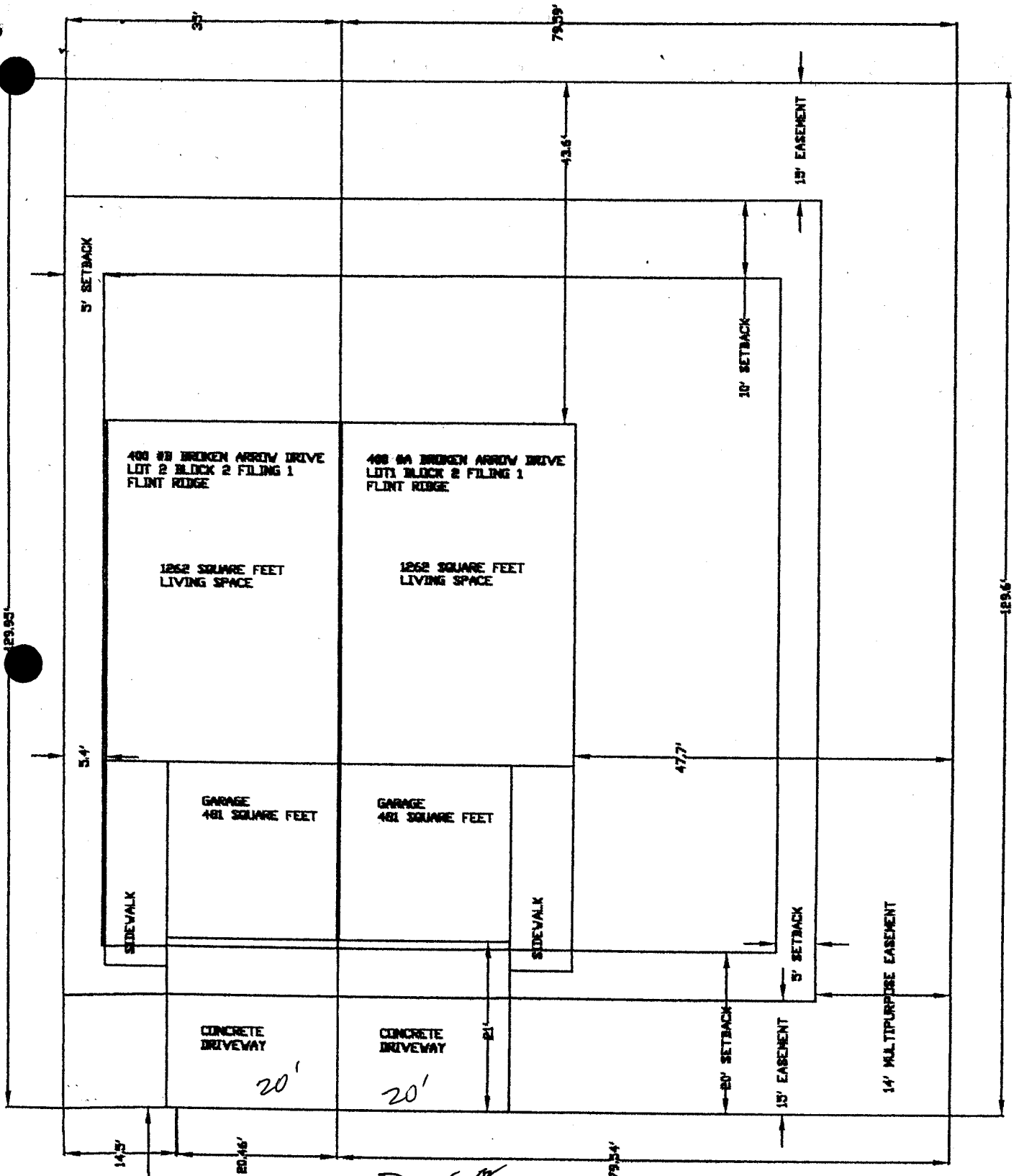
Applicant Signature [Signature] Date 4/9/02

Department Approval [Signature] Date 4-10-02

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO _____	W/O No. <u>Paid 2 CGUSD</u>
Utility Accounting <u>[Signature]</u>	Date <u>4/10/02</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)



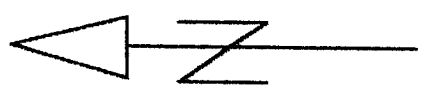
DRIVE OK
 and
 4/9/02

BROKEN ARROW DRIVE

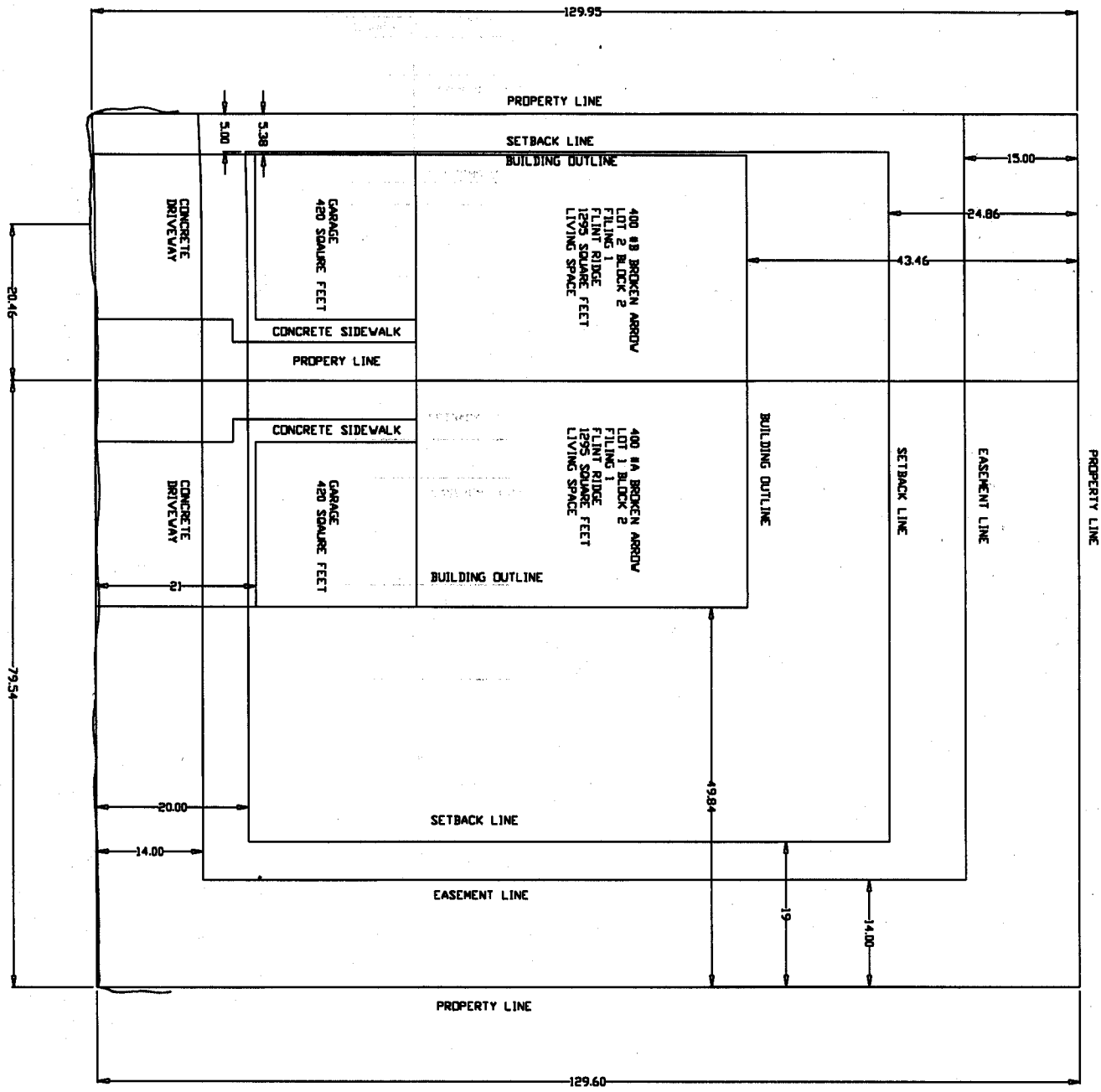
4-10-02

Dayle H. Linton

NO CHANGE OF SETBACKS MUST BE
 APPROVED BY THE CITY PLANNING
 DEPARTMENT AS THE APPLICANT'S
 RESPONSIBILITY TO PROPERLY
 LOCATE AND IDENTIFY EASEMENTS
 AND PROPERTY LINES.



ACCEPTED *Revised C. Tave Nilsen 5/16/02*
 ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES



Drives ok
 BROKEN ARROW DRIVE
5/16/02