

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

PLANNING CLEARANCE

BLDG PERMIT NO. 85789

(Single Family Residential and Accessory Structures)
Community Development Department



Your Bridge to a Better Community

324 C-1918-1187

BLDG ADDRESS ~~324~~ Fair View ^{ac AR} SQ. FT. OF PROPOSED BLDGS/ADDITION 270.25

TAX SCHEDULE NO. River Side 2945-154-23-014 SQ. FT. OF EXISTING BLDGS ~~1600~~ 1600 sq ft

SUBDIVISION River Side TOTAL SQ. FT. OF EXISTING & PROPOSED 1870.25 sq ft.

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

(1) OWNER Arline May Batten NO. OF BUILDINGS ON PARCEL
Before: 1 After: 2 this Construction

(1) ADDRESS 324 Fair View USE OF EXISTING BUILDINGS Home

(1) TELEPHONE 256-7935 DESCRIPTION OF WORK & INTENDED USE Bedroom & Bathroom

(2) APPLICANT Arline May Batten TYPE OF HOME PROPOSED:
Site Built _____ Manufactured Home (UBC) _____
Manufactured Home (HUD) _____
Other (please specify) _____

(2) ADDRESS Same as above

(2) TELEPHONE Same

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 _____

SETBACKS: Front 25' from property line (PL) Permanent Foundation Required: YES _____ NO _____
or _____ from center of ROW, whichever is greater

Side 3' from PL, Rear 5' from PL Parking Req'mt 2

Maximum Height 35' Special Conditions No kitchen allowed!

CENSUS _____ TRAFFIC _____ ANN# _____

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 Arline M Batten Date 7-22-02

Department Approval C. Jay Nelson Date 7/24/02

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. _____
Utility Accounting <u>T. Shupe</u>	Date <u>7/24/02</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)

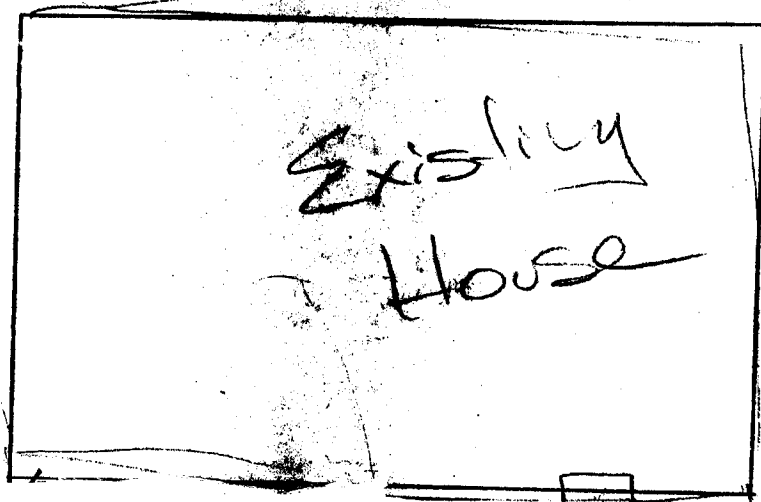
324

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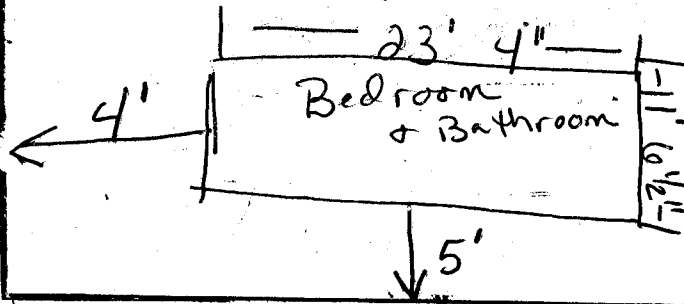
7/24/02

C. Faye Gilbert Estate

ACCEPTED
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



75 ft



2

20 7"

15' No more

50 ft

324

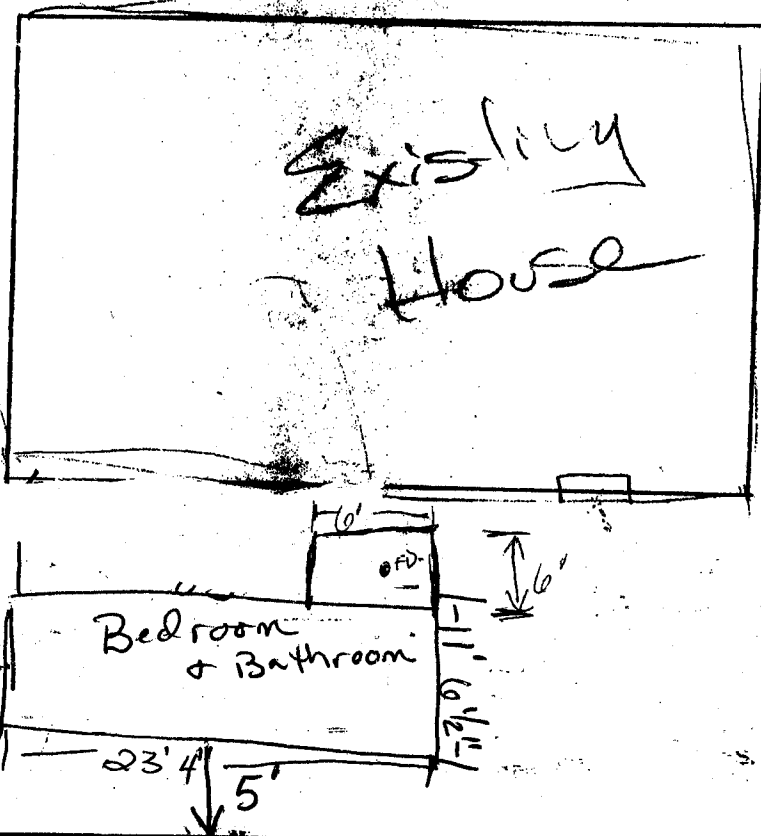
Farrisen

7/24/02

Revised 9/9/02

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