FEE $ 5.00	
TCP $ 0	
SIF $ 0	

PLANNING CLEARANCE
(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. N/A

Your Bridge to a Better Community

BLDG ADDRESS ~~440~~ 404 West Grand

TAX SCHEDULE NO. 2945-151-00-068

SUBDIVISION _____

FILING _____ BLK _____ LOT _____

(1) OWNER Bill M Williams

(1) ADDRESS 404 West Grand

(1) TELEPHONE _____

(2) APPLICANT Steve Voytilla

(2) ADDRESS 2785 D Rd

(2) TELEPHONE 234-2000

SQ. FT. OF PROPOSED BLDGS/ADDITION _____

SQ. FT. OF EXISTING BLDGS 300 sq ft

TOTAL SQ. FT. OF EXISTING & PROPOSED 300

NO. OF DWELLING UNITS:
Before: 1 After: 0 this Construction
NO. OF BUILDINGS ON PARCEL
Before: 1 After: 1 this Construction

USE OF EXISTING BUILDINGS ~~Demo Only~~ Dwelling

DESCRIPTION OF WORK & INTENDED USE Demo Only

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

REQUIRED: One plot plan, on 8 ½" 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

SETBACKS: Front 20/25 from property line (PL)
or _____ from center of ROW, whichever is greater

Side 5/3 from PL, Rear 10/5 from PL

Maximum Height 35'

Maximum coverage of lot by structures 70%

Permanent Foundation Required: YES_____ NO_____

Parking Req'mt 0

Special Conditions _____

CENSUS _____ TRAFFIC _____ 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 _[signature]_   Date _____

Department Approval _[signature]_   Date 2/19/02

Additional water and/or sewer tap fee(s) are required:	YES	NO ✓	W/O No. Demo Only
Utility Accounting _[signature]_		Date 2-19-02	

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1.c(1) Grand Junction Zoning & Development Code)

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