

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

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

BLDG PERMIT NO. 83343



Your Bridge to a Better Community

BLDG ADDRESS 2653 Grand Vista Dr SQ. FT. OF PROPOSED BLDGS/ADDITION Living 2892 / Garage 770

TAX SCHEDULE NO. 2701-261-00-702 SQ. FT. OF EXISTING BLDGS 0

SUBDIVISION Grand Vista TOTAL SQ. FT. OF EXISTING & PROPOSED 3662

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

(1) OWNER Mary S Hammond NO. OF BUILDINGS ON PARCEL FEB 22 2002
 Before: _____ After: 1 this Construction 2002

(1) ADDRESS 2844 27 1/2 Road USE OF EXISTING BUILDINGS N/A

(1) TELEPHONE 970-241-9576 DESCRIPTION OF WORK & INTENDED USE New Residential Construction

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

(2) ADDRESS _____

(2) TELEPHONE _____

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 R SF-4 Maximum coverage of lot by structures 50%

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

Side 7' from PL, Rear 25' from PL Parking Req'mt 2

Maximum Height 35' Special Conditions _____

CENSUS 16 TRAFFIC 13 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 Mary S. Hammond Date 02/13/02

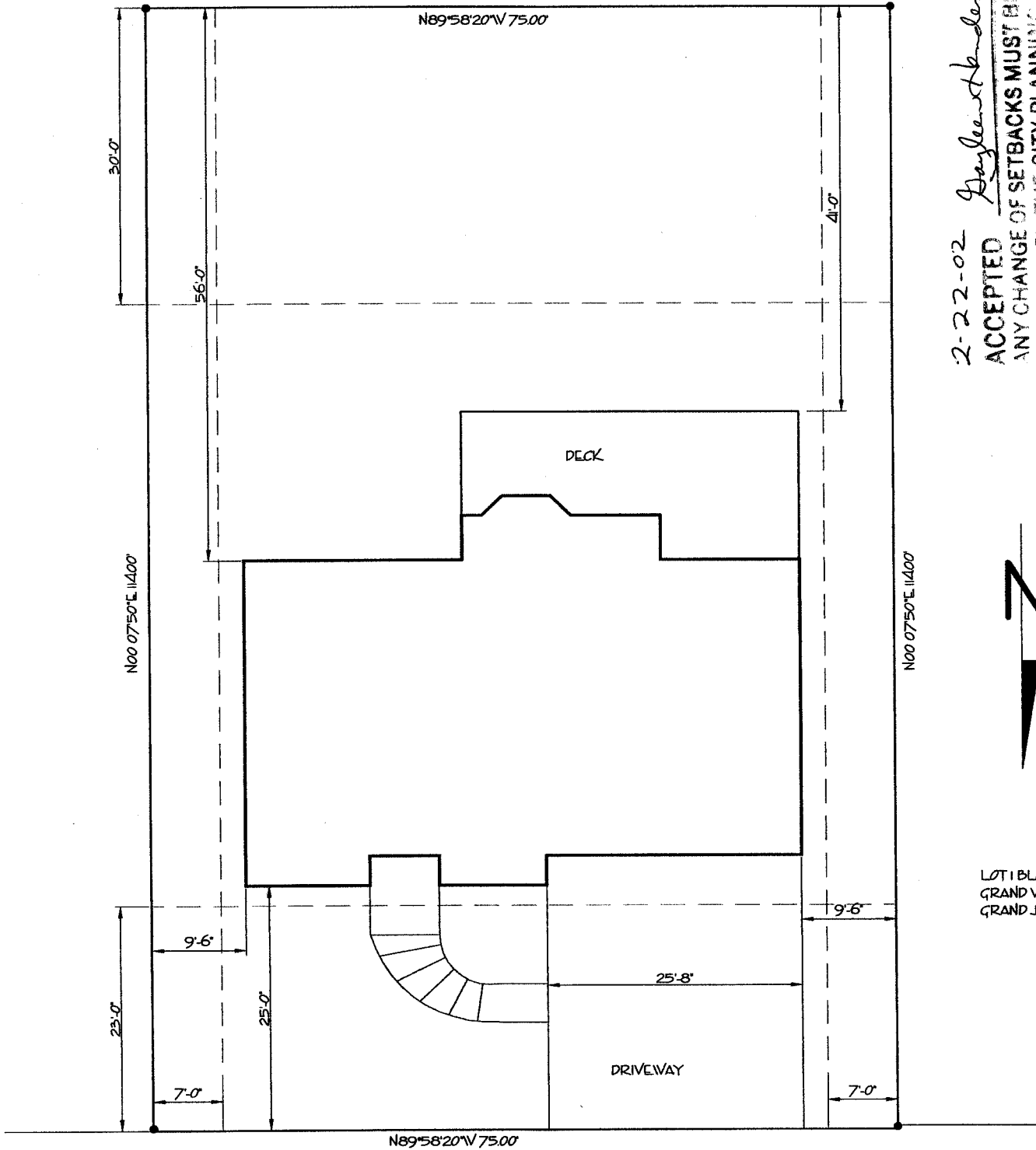
Department Approval Gayleen Henderson Date 2-22-02

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>14616</u>
Utility Accounting	<u>P. Beusley</u>		Date <u>2/22/02</u>

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)

HAMMOND
RESIDENCE
2653 GRAND VISTA DR.



GRAND VISTA DRIVE

DRIVE OK
SH 2/22/02

2-22-02 *Dayleent Anderson*
ACCEPTED
ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPARTMENT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.



LOT 1 BLOCK 2
GRAND VISTA SUBDIVISION
GRAND JUNCTION CO