

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

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. 83505



Your Bridge to a Better Community

BLDG ADDRESS 2858 Grand Falls SQ. FT. OF PROPOSED BLDGS/ADDITION 1572
TAX SCHEDULE NO. 2943-071-21-003 SQ. FT. OF EXISTING BLDGS N/A
SUBDIVISION The Legends TOTAL SQ. FT. OF EXISTING & PROPOSED 1572
FILING 2 BLK 2 LOT 3 NO. OF DWELLING UNITS:
Before: 0 After: 1 this Construction
(1) OWNER ABELL Partners. NO. OF BUILDINGS ON PARCEL
Before: 0 After: 1 this Construction
(1) ADDRESS P.O. Box 1765, B.T., CO 81502 USE OF EXISTING BUILDINGS N/A
(1) TELEPHONE 970-244-9986 #17 DESCRIPTION OF WORK & INTENDED USE New Single Family
(2) APPLICANT ABELL Partners TYPE OF HOME PROPOSED:
(2) ADDRESS Same Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
(2) TELEPHONE Same 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

ZONE PD Maximum coverage of lot by structures _____
SETBACKS: Front 15' 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'mt 2
Special Conditions _____
Maximum Height 32' CENSUS 6 TRAFFIC 29 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).

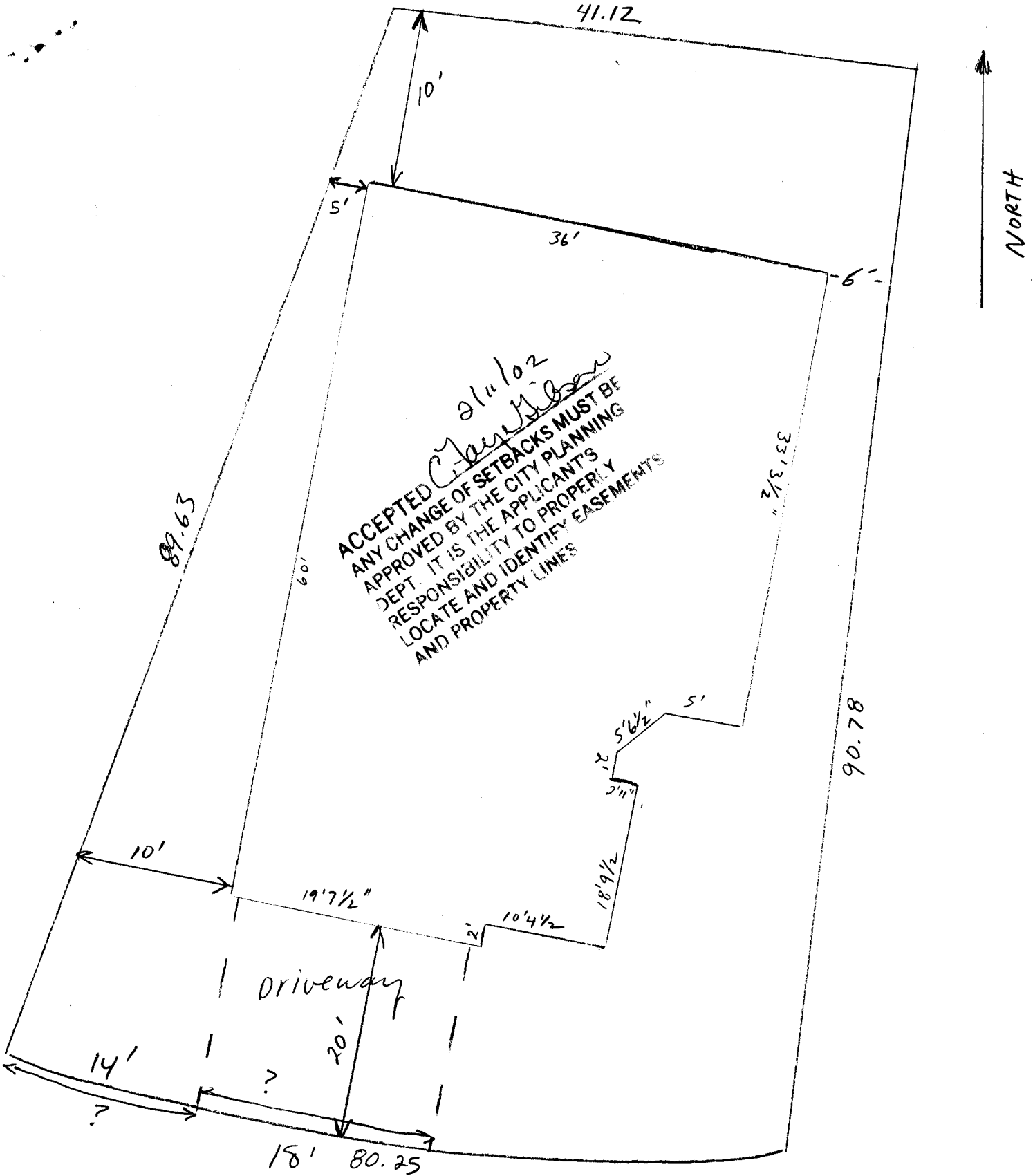
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily be limited to non-use of the building(s).

Applicant Signature [Signature] Date 1-31-02
Department Approval [Signature] Date 2/11/02

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>9915</u>
Utility Accounting <u>[Signature]</u>	Date <u>2-11-02</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)



GRAND FALLS DRIVE

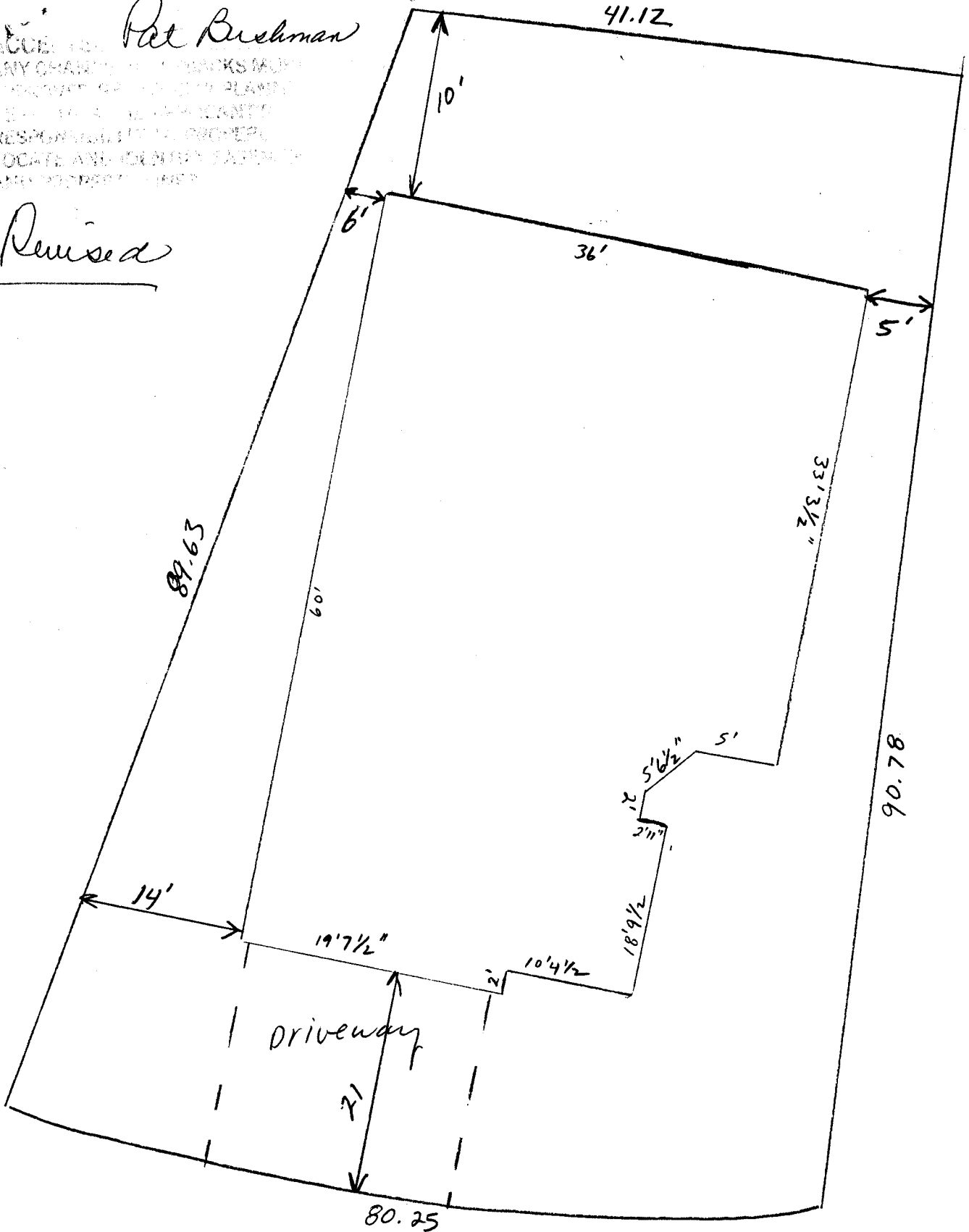
DRIVE OR
DML
2/11/02

3-13-02

2858 GRAND Falls

Pat Bushman
 ANY CHANGES TO THIS PLAN MUST BE MADE BY THE CLIENT. THE SURVEYOR IS NOT RESPONSIBLE FOR THE PROPER LOCATION AND IDENTIFICATION OF ANY UTILITIES SHOWN.

Revised



GRAND FALLS DRIVE