·	
FEE \$ 10.00 PLANNING CLI TCP \$ 0 (Single Family Residential and Community Developm) SIF \$ 0 0	Accessory Structures)
BLDG ADDRESS 2845 gravo View CT.	SQ. FT. OF PROPOSED BLDGS/ADDITION 1350
TAX SCHEDULE NO. 2943-072-20-013	SQ. FT. OF EXISTING BLDGS O
SUBDIVISION FAUS FILING # 1	TOTAL SQ. FT. OF EXISTING & PROPOSED 1350
(1) OWNER $\underline{D_{1N}eSAur ENT}$ \underline{INc} (1) ADDRESS $\underline{Rox 2743}$ $\underline{J}\dot{1}$ \underline{Co} (1) ADDRESS $\underline{Rox 2743}$ $\underline{J}\dot{1}$ \underline{Co} (1) TELEPHONE $\underline{Z41 - 2672}$ (2) ADDRESS $\underline{Rox 2743}$ (2) ADDRESS $\underline{Rox 2743}$ (2) TELEPHONE $\underline{241 - 2672}$ REQUIRED: One plot plan, on 8 ½" x 11" paper, showing all	NO. OF DWELLING UNITS: Before: After: this Construction NO. OF BUILDINGS ON PARCEL Before: After: this Construction USE OF EXISTING BUILDINGS Starfle FAMILY Home DESCRIPTION OF WORK & INTENDED USE New Construction TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC) Site Built Manufactured Home (UBC) Other (please specify) existing & proposed structure location(s), parking, setbacks to all thin & width & all easements & rights-of-way which abut the parcel.
THIS SECTION TO BE COMPLETED BY COM ZONE	MMUNITY DEVELOPMENT DEPARTMENT STAFF Sol Maximum coverage of lot by structures Permanent Foundation Required: YES NO Parking Req'mt 2 Special Conditions ACO Required CENSUS TRAFFIC ANNX# MEND ADM OR OTHOMS Required

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	Date 7/8/02
Department Approval Hayleen Henderson	Date 7-15-02
Additional water and/or sewer tap fee(s) are required: YES	NO W/O NO. 15094
Utility Accounting	Date
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C	Grand Junction Zoning & Development Code)

