FEE \$ /0.00 PLANNING CL TCP \$ Ø (Single Family Residential an Community Develop) SIF \$ Ø SIF \$ Ø	d Accessory Structures)
BLOG ADDRESS <u>110</u> <u>COUNTISON</u> AN TAX SCHEDULE NO. <u>2945-142-24-009</u> SUBDIVISION <u>COTAND</u> <u>Junction</u> FILING <u>BLK 34</u> LOT <u>22</u> (1) OWNER <u>COEOGE</u> <u>Austin</u> (1) ADDRESS <u>110</u> <u>CUNNISOR</u>	SQ. FT. OF PROPOSED BLDGS/ADDITION <u>64</u> SQ. FT. OF EXISTING BLDGS <u>503</u> TOTAL SQ. FT. OF EXISTING & PROPOSED <u>567</u> NO. OF DWELLING UNITS: Before: <u>1</u> After: <u>1</u> this Construction NO. OF BUILDINGS ON PARCEL Before: <u>1</u> After: <u>2</u> this Construction USE OF EXISTING BUILDINGS <u>PLSIDENTIA</u>
	DESCRIPTION OF WORK & INTENDED USE TYPE OF HOME PROPOSED: Site BuiltManufactured Home (UBC) Manufactured Home (HUD) Other (please specify)SM2 Il existing & proposed structure location(s), parking, setbacks to all ration & width & all easements & rights-of-way which abut the parcel.
THIS SECTION TO BE COMPLETED BY CO ZONE $\underline{R} - \underline{O}$ SETBACKS: Front $\underline{25'}$ from property line (PL) or from center of ROW, whichever is greater Side $\underline{5'}$ from PL, Rear $\underline{5'}$ from PL Maximum Height $\underline{35'}$	MAXIMUM COVERAGE OF IOUR DEPARTMENT STAFF SAME Maximum coverage of Iot by structures Permanent Foundation Required: YESNO_X Parking Req'mt Special Conditions CENSUS TRAFFICANNX#

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 GCOTOLAUSTIC	Date 1/ 20 2001
Department Approval C. Jaugh Jubon	Date 11 20 02
Additional water and/or sewer tap fee(s) are required: YES	NO W/O No.
Utility Accounting Occoms	Date 11.20.02

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)

