FEE \$ 10.00 PLANNING CI	
TCP \$ 500.00 (Single Family Residential and Community Develop) SIF \$ 292.00 Community Develop)	ment Department
	Your Bridge to a Better Community
BLDG ADDRESS 2895 West Acronomica	180. FT. OF PROPOSED BLDGS/ADDITION _/609
TAX SCHEDULE NO. 2943-064-36-009	SQ. FT. OF EXISTING BLDGS O Carrage 400
SUBDIVISION Indain Wash TL	TOTAL SQ. FT. OF EXISTING & PROPOSED 2004
FILING BLK LOT	NO. OF DWELLING UNITS: Before: After: this Construction
"OWNER Bruce Heyman	NO. OF BUILDINGS ON PARCEL
(1) ADDRESS 3734 6 4/0 Rd	Before: After: this Construction
1) TELEPHONE 464-0420	
(2) APPLICANT Same	DESCRIPTION OF WORK & INTENDED USE Build House
(2) ADDRESS	TYPE OF HOME PROPOSED:
⁽²⁾ TELEPHONE	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.

IN THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF 30

$zone _ PO _ _$	Maximum coverage of lot by structures 35^{9}
SETBACKS: Front	Permanent Foundation Required: YES_X_NO
Side $\underline{10'}$ from PL, Rear $\underline{5'}$ from PL	Parking Req'mt
Maximum Height 32'	Special Conditions
	CENSUS 10 TRAFFIC 22 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	Date 3-28-02
Department Approval Dayleen Henderson	Date 4-1-02
Additional water and/or sewer tap fee(s) are required:	NO , W/O No. 14697
Utility Accounting Jahr (Jueno /	Date 4/1/02
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1.	c(1) Grand Junction Zoning & Development Code)

