

FEE \$	10.00
TCP \$	0
SIF \$	0

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

BLDG PERMIT NO. 82883



Your Bridge to a Better Community

13346-8373
 BLDG ADDRESS 111 Hillcrest

SQ. FT. OF PROPOSED BLDGS/ADDITION 768 sq ft

TAX SCHEDULE NO. 2945 11215 006

SQ. FT. OF EXISTING BLDGS 1800 sq ft

SUBDIVISION _____

TOTAL SQ. FT. OF EXISTING & PROPOSED 2568 sq ft

FILING _____ BLK _____ LOT _____

NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction

(1) OWNER Tim Sarno

NO. OF BUILDINGS ON PARCEL
 Before: 1 After: 2 this Construction

(1) ADDRESS 111 Hillcrest Manor

USE OF EXISTING BUILDINGS residence

(1) TELEPHONE 245-8930

DESCRIPTION OF WORK & INTENDED USE new garage

(2) APPLICANT SAE Construction

TYPE OF HOME PROPOSED:
 Site Built Manufactured Home (UBC)

(2) ADDRESS 2332 K Rd. G.D.

Manufactured Home (HUD)
 Other (please specify) garage

(2) TELEPHONE 260-0944

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 RSF-4

Maximum coverage of lot by structures 50%

SETBACKS: Front 20' from property line (PL)
 or _____ from center of ROW, whichever is greater

Permanent Foundation Required: YES _____ NO _____

Side 3' from PL, Rear 5' from PL

Parking Req'mt 2

Maximum Height 35'

Special Conditions _____

CENSUS 4 TRAFFIC 25 ANN# _____

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 1/11/02

Department Approval [Signature] Date 1/11/02

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No.
Utility Accounting	<u>[Signature]</u>	Date	<u>1/11/02</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)

11/11/02

ACCEPTED *C. Faye Gibson*

ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.

