

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

PLANNING CLEARANCE

BLDG PERMIT NO. 85517

(Single Family Residential and Accessory Structures)
Community Development Department



Your Bridge to a Better Community

28463-19002

BLDG ADDRESS 2890 Kiowa Ct SQ. FT. OF PROPOSED BLDGS/ADDITION 12 by 16

TAX SCHEDULE NO. 2943-064-11-02 SQ. FT. OF EXISTING BLDGS 1400 sq ft approx

SUBDIVISION Indian Village TOTAL SQ. FT. OF EXISTING & PROPOSED 192 sq ft

FILING _____ BLK _____ LOT _____

NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction
 NO. OF BUILDINGS ON PARCEL
 Before: _____ After: _____ this Construction

(1) OWNER Randall Austin

(1) ADDRESS 2890 Kiowa Ct

(1) TELEPHONE 970 242 1025

USE OF EXISTING BUILDINGS on patio cover

(2) APPLICANT Randall Austin

DESCRIPTION OF WORK & INTENDED USE _____

(2) ADDRESS 2890 Kiowa Ct

TYPE OF HOME PROPOSED:
 Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify) _____

(2) TELEPHONE 970 242 1025

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 Rmf-5

Maximum coverage of lot by structures 60%

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

Permanent Foundation Required: YES _____ NO _____

Side 5' from PL, Rear 25' from PL

Parking Req'mt 2

Maximum Height 35

Special Conditions _____

CENSUS _____ TRAFFIC _____ 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 Randall Austin

Date 7/22/02

Department Approval C. J. Gibson

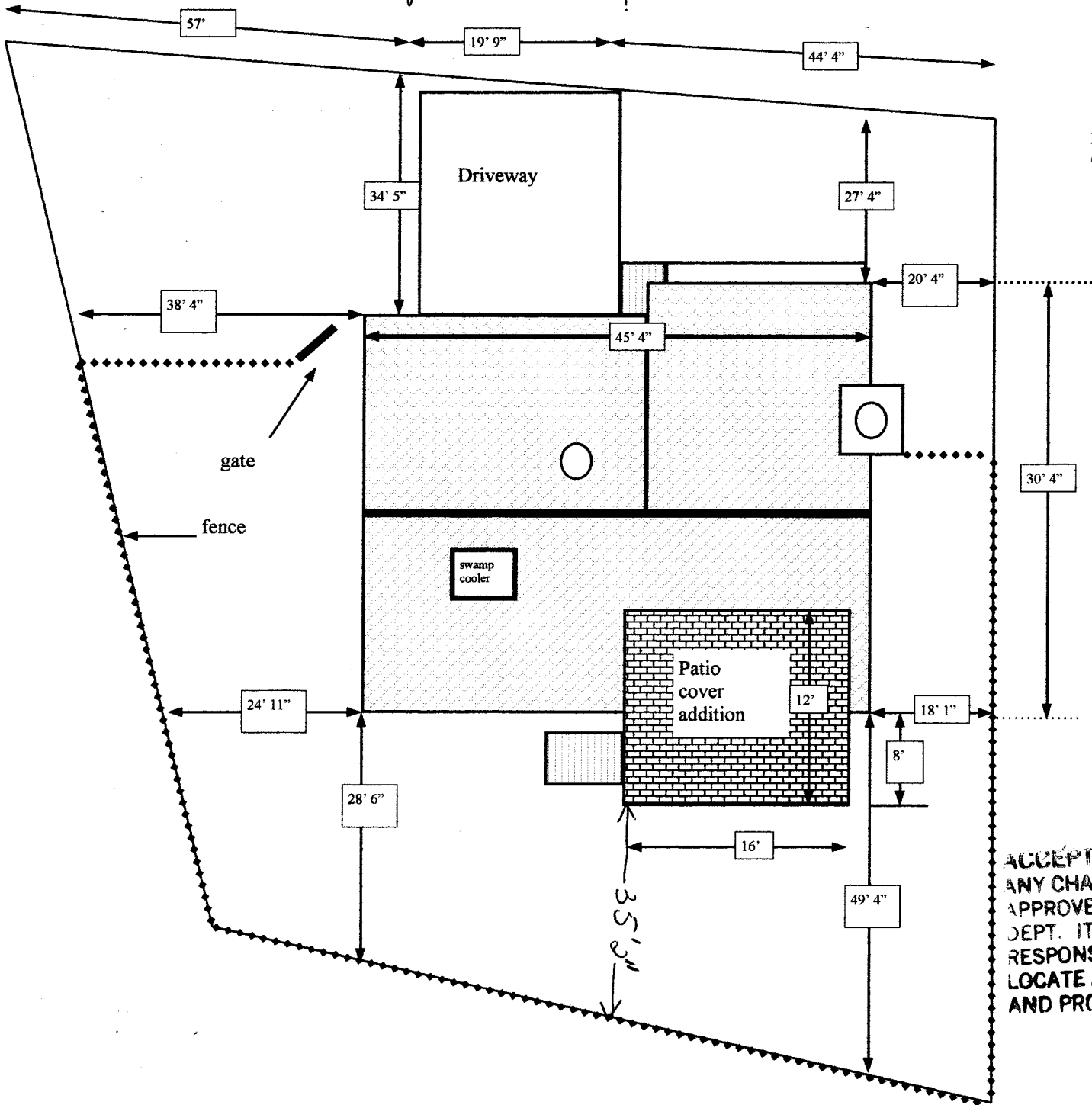
Date 7/23/02

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>no chg in used in</u>
Utility Accounting	<u>Ch Cole</u>	Date	<u>7/23/02</u>

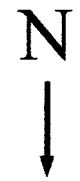
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

Kiowa Ct



2890 Kiowa Ct
Grand Jct. CO



7/23/02
 ACCEPTED *Cheryl Silsen*
 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.