FEE $ *10.00*	**PLANNING CLEARANCE**	BLDG PERMIT NO. *82906*
TCP $ *0*	(Single Family Residential and Accessory Structures)	
SIF $ *292.00*	**Community Development Department**	

Your Bridge to a Better Community

BLDG ADDRESS *605 B. Lavender Ct* SQ. FT. OF PROPOSED BLDGS/ADDITION *1373*

TAX SCHEDULE NO. *2945-014-02-010* SQ. FT. OF EXISTING BLDGS *0*

SUBDIVISION *Springside Townhome* TOTAL SQ. FT. OF EXISTING & PROPOSED *1373*

FILING *1* BLK *1* LOT *10*

(1) OWNER *G+R West, LLC*

(1) ADDRESS *2650 El Corona Dr*

(1) TELEPHONE *255-8164*

(2) APPLICANT *Rob Cantrell*

(2) ADDRESS *Same*

(2) TELEPHONE *Sam.*

NO. OF DWELLING UNITS:
Before: *0* After: *1* this Construction

NO. OF BUILDINGS ON PARCEL
Before: *0* After: *1* this Construction

USE OF EXISTING BUILDINGS _____

DESCRIPTION OF WORK & INTENDED USE _____

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

☞ **THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF** ☜

ZONE *PD*

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

Side *5'* from PL, Rear *20'* from PL

Maximum Height _____

Maximum coverage of lot by structures _____

Permanent Foundation Required: YES *X* NO _____

Parking Req'mt *2*

Special Conditions _____

CENSUS *10* TRAFFIC *21* 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 *01-14-02*

Department Approval *M C Faye Dilson MGR* Date *1 15 02*

Additional water and/or sewer tap fee(s) are required:	YES ✓	NO	W/O No. *14511*
Utility Accounting *P Beasley*		Date *1 15 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)*

SPRINGSIDE CT

N 89°09'08" E

R: 150.00   69.77
45.65   (A)   44.00

S00°00'13"W   45.54

S45°25'19"E

C2   33.74   19.23'

N89°59'47"W   9.51

20.0   LOT 10

605b

40.00   40.00

45.00   3"W

LOT 9   C3

605a

40.00   40.00

S00°00'13"W

20.0   45.00

R=500.00   (B)

N89°46'00"W

20.4   LOT 8

603 C

34.00   34.00

52.00

50   LOT 7

603 B

34.00   34.00

52.00

36.00   LOT 6

34.00   603 A   34.00

54.00

COMN AREA OWNED
BY HEOWNERS ASSOC.

109.48

115.50

S89°46'00" E

S00°00'13"W   122.00

80.00   Irrigation Easement   &   13.07

15' Utility, Drainage   15' Utility,

N00°14'00"E   44.2'

N82°52'5

16.00

LAVENDER CT

S07°07'04"E   44.78

44.78

14' M

DRIVEWAY PLACEMENT

DRIVES OK
DNL
1/15/02