

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

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

BLDG PERMIT NO. N/A



Your Bridge to a Better Community

BLDG ADDRESS 619 Monarch Way SQ. FT. OF PROPOSED BLDGS/ADDITION 80

TAX SCHEDULE NO. 2943-043-59005 SQ. FT. OF EXISTING BLDGS 1225

SUBDIVISION Mountain Vista TOTAL SQ. FT. OF EXISTING & PROPOSED _____

FILING _____ BLK 1 LOT 5

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

(1) OWNER Allan & Gail Chico NO. OF BUILDINGS ON PARCEL
 Before: _____ After: _____ this Construction

(1) ADDRESS 619 Monarch Way USE OF EXISTING BUILDINGS hawn Storage

(1) TELEPHONE (970) 434-4478 DESCRIPTION OF WORK & INTENDED USE _____

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

(2) ADDRESS same

(2) TELEPHONE same

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 25' from property line (PL) Permanent Foundation Required: YES _____ NO X
 or _____ from center of ROW, whichever is greater

Side 3' from PL, Rear 5' from PL Parking Req'mt _____

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 Allan C. Chico Date 5-3-02

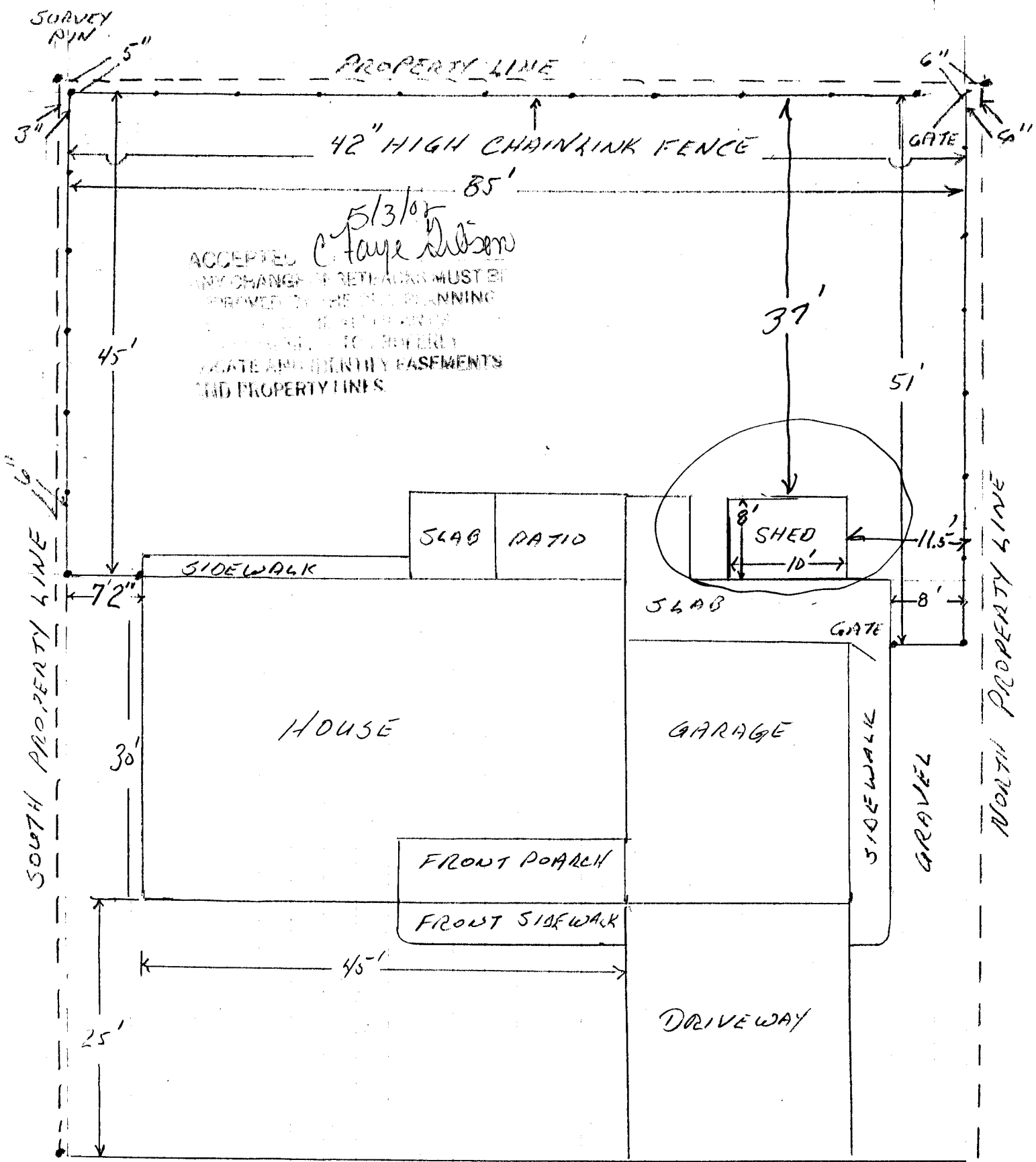
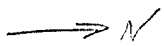
Department Approval C. Jaye Wilson Date 5/3/02

Additional water and/or sewer tap fee(s) are required:	YES	NO <u>X</u>	W/O No. _____
Utility Accounting	<u>Jaye Wilson</u>		Date <u>5/3/02</u>

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1.c(1) Grand Junction Zoning & Development Code)

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

BACKYARD LAYOUT
 619 MONARCH WAY
 SCALE 1/4" = 3'
 Allan C. & Gail G. Chicon



MONARCH WAY