

FEE \$ 10.00
 TCP \$ 500.00
 SIF \$ 292.00

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

BLDG PERMIT NO. 83899



Your Bridge to a Better Community

BLDG ADDRESS 464 Morning Dove SQ. FT. OF PROPOSED BLDGS/ADDITION 1433
 TAX SCHEDULE NO 2943-161-00-044 SQ. FT. OF EXISTING BLDGS Ø
 SUBDIVISION Cimmaron East TOTAL SQ. FT. OF EXISTING & PROPOSED 1433
 FILING 1 BLK 1 LOT 11
 NO. OF DWELLING UNITS:
 Before: Ø After: 1 this Construction
 (1) OWNER Grand Ridge Properties NO. OF BUILDINGS ON PARCEL
 Before: Ø After: 1 this Construction
 (1) ADDRESS 3032 I-70 Bus Loop
 (1) TELEPHONE 434-4616 USE OF EXISTING BUILDINGS N/A
 (2) APPLICANT Great Services DESCRIPTION OF WORK & INTENDED USE Single family residence
 (2) ADDRESS 3032 I-70 Bus Loop TYPE OF HOME PROPOSED:
 (2) TELEPHONE 434-4616 Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify) _____

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 PD Maximum coverage of lot by structures _____
 SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES NO _____
 or _____ from center of ROW, whichever is greater
 Side 5' from PL, Rear 25' from PL Parking Req'mt 2
 Maximum Height _____ Special Conditions _____
 CENSUS 4 TRAFFIC 57 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).

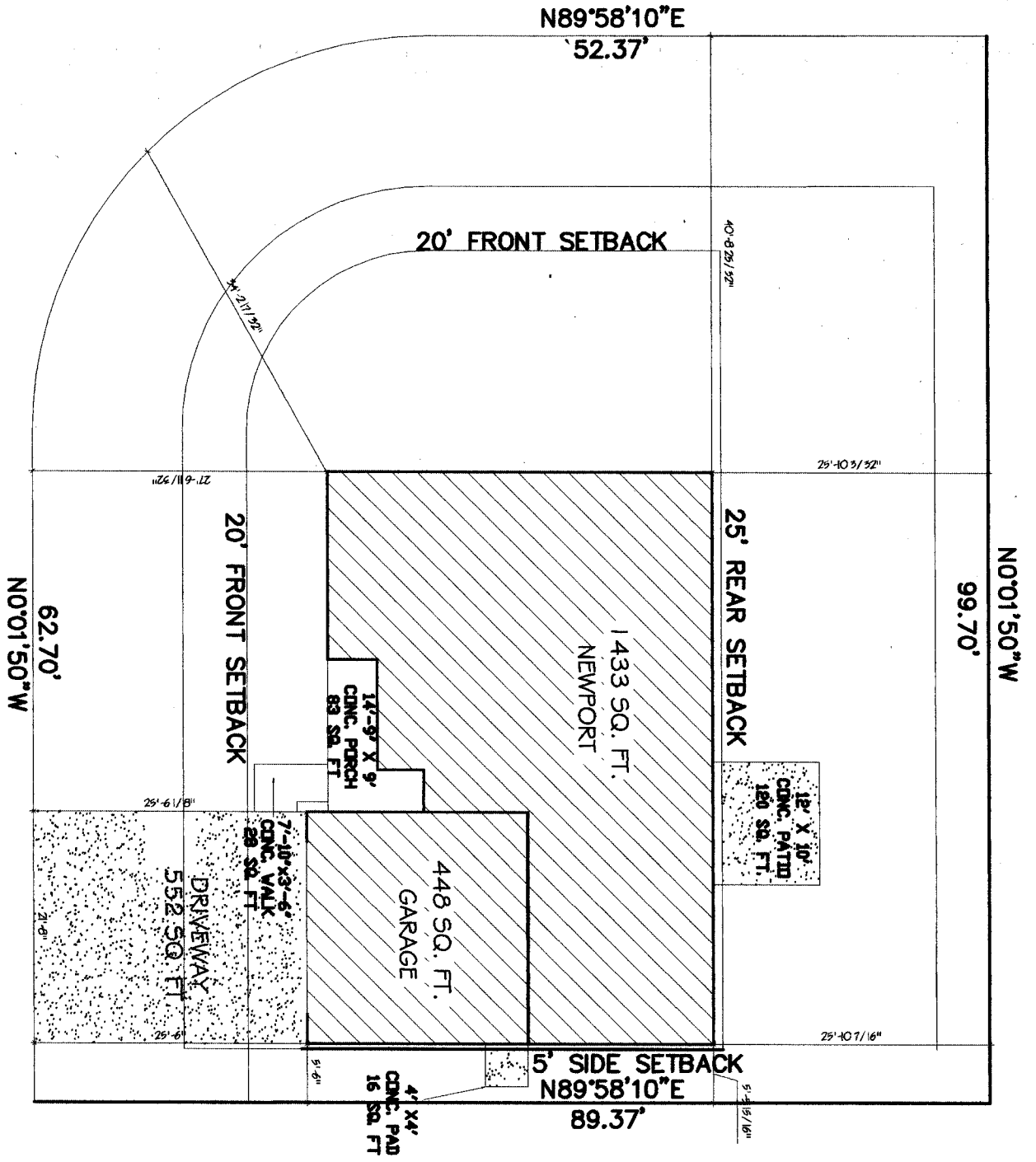
Applicant Signature Johanna Amador-Cruz Date 4-1-02
 Department Approval Ab. C. Faye Johnson Date 4/1/02

| | | | |
|--|---|-----------------------------|------------------------|
| Additional water and/or sewer tap fee(s) are required: | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> | W/O No <u>PD CGUSD</u> |
| Utility Accounting <u>[Signature]</u> | Date <u>4/1/02</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)

Morning Dove St

MORNING DOVE STREET



4/11/02
 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.

DRIVE OK
 ONE
 4/14/02

464 Morning Dove St.