FEE \$	10.	00
TCP\$	•	
SIF \$	292	00

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO. 00063



BLDG ADDRESS 2431 SPANISH BIMULY CFQ. FT. OF PROPOSED BLDGS/ADDITION 1341
TAX SCHEDULE NO. 2701-333-05-011 SQ. FT. OF EXISTING BLDGS
SUBDIVISION SPANIS LTAIS TOTAL SQ. FT. OF EXISTING & PROPOSED 134/
FILING BLK 3 LOT 1/ NO. OF DWELLING UNITS:
OWNER Custom and Ality Home NO. OF BUILDINGS ON PARCEL
(1) ADDRESS 2394 SAYRE DR. Before: After: this Construction
(1) TELEPHONE 741 - 0325 USE OF EXISTING BUILDINGS <u>SFK</u>
(2) APPLICANT Tom Heilig DESCRIPTION OF WORK & INTENDED USE 1 ew Home
(2) ADDRESS 23945A4RE DR TYPE OF HOME PROPOSED: 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 Maximum coverage of lot by structures
SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES_X NO or from center of ROW, whichever is greater
Side 5 from PL, Rear 20 from PL
Special Conditions \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Maximum Height 32 CENSUS 9 TRAFFIC 5 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 Many & Mary Date 9/4/02
Department Approval 16. Cay Dubon Date 9 4 02
Additional water and/or sewer tap fee(s) are required: YES NO W/O No. 15271
Utility Accounting ()// Charle (Q) Date (Q)

