

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

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

BLDG PERMIT NO. 84013



Your Bridge to a Better Community

BLDG ADDRESS 704 1/2 SPANISH TRAILS DRIVE SQ. FT. OF PROPOSED BLDGS/ADDITION 1816

TAX SCHEDULE NO. 2701-333-01-001 SQ. FT. OF EXISTING BLDGS 0

SUBDIVISION SPANISH TRAILS TOTAL SQ. FT. OF EXISTING & PROPOSED 1816

FILING 1 BLK 3 LOT 8 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER F. THAD HARRIS NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS 2022 WEST LIBERTY CT. USE OF EXISTING BUILDINGS NONE

(1) TELEPHONE 970-243-0303 DESCRIPTION OF WORK & INTENDED USE SINGLE FAMILY RESIDENCE

(2) APPLICANT THAD HARRIS 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 PD 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 Parking Req'mt 2

Maximum Height 32' Special Conditions Letter from licensed engineer required

CENSUS 9 TRAFFIC 5 ANNEX# _____

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 F. Thad Harris Date 4-18-02

Department Approval Bill Gayles Henderson Date 4-19-02

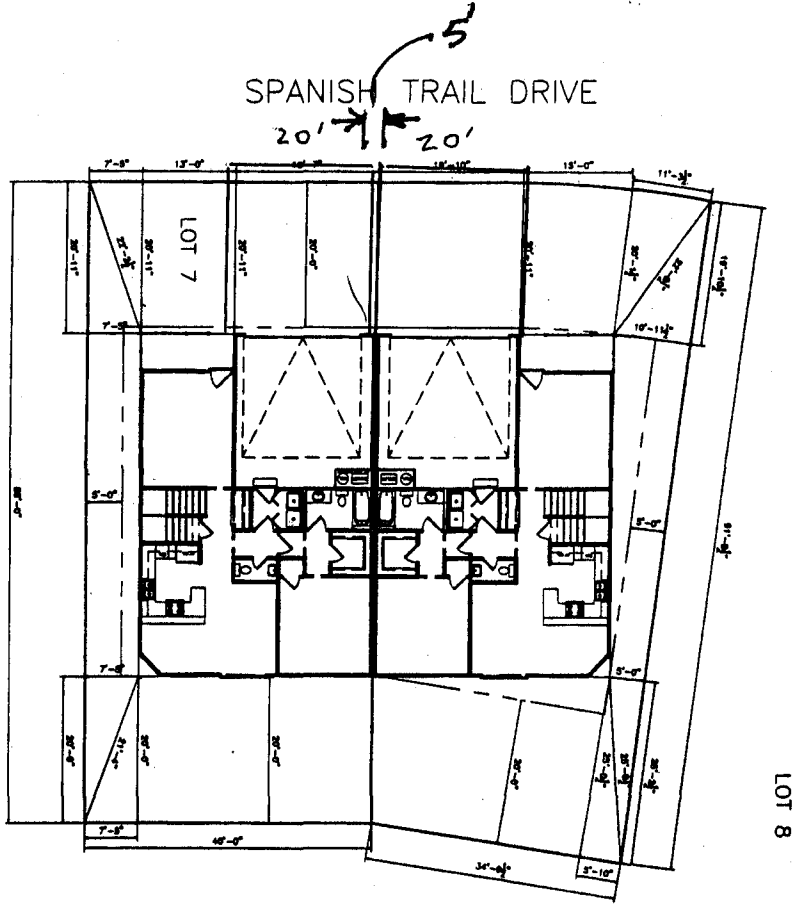
Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>14778</u>
Utility Accounting	<u>[Signature]</u>		Date <u>4/19/02</u>

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)

4-19-02
 ACCEPTED *Gayle Henderson*
 ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPARTMENT. THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES

NOTICE:
 1. THE RESPONSIBILITY OF THE BUILDER OR OWNER TO VERIFY ALL DETAILS.
 2. SET OF THIS PLAN COMPLETION DATE FOR ALL WORKING APPROXIMATE OF THESE TERMS.
 3. ALL DIMENSIONS ARE TO FACE OF BRICK UNLESS OTHERWISE NOTED.
 4. WALLS ARE DRAWN AS 3-1/2" THICK FOR 8" WALLS AND 5-1/2" FOR 2" WALLS.
 5. THIS PLAN HAS NOT BEEN CHECKED BY AIRBORNE. SEE SEPARATE DIMENSIONS BY OTHERS FOR CORRECTING DATA.



*Drive OK
 Tree Down
 4-19-02*

DATE: 5-2-02
 APPROVAL: 1/2" = 1'-0"
 SHEET 6

THE GENESIS
 DUPLEX SITE PLAN

Auto DRAFT
 COMPUTER AIDED DRAFTING
 GRAND JUNCTION, CO (970) 241-8782

1	REVISIONS
2	
3	
4	
5	
6	
7	
8	

