FEE\$	10.00	
TCP \$	Ø	
SIF\$	d	:
	7	

PLANNING CLEARANCE

BLDG PERMIT NO. 85847

(Single Family Residential and Accessory Structures) Community Development Department

SQ. FT. OF PROPOSED BLOGS/ADDITION __ 64 -014-02-000 SQ. FT. OF EXISTING BLDGS KONLOJIOTAL SQ. FT. OF EXISTING & PROPOSED_ NO. OF DWELLING UNITS: Before: _____ After: ______ this Construction (1)OWNER CO+ NO. OF BUILDINGS ON PARCEL Before: _____ After: _____ this Construction USE OF EXISTING BUILDINGS ______ (1) TELEPHONE 255 -DESCRIPTION OF WORK & INTENDED USE MATCH TYPE OF HOME PROPOSED: (2) ADDRESS Site Built _____ Manufactured Home (UBC) Manufactured Home (HUD) (2) TELEPHONE Other (please specify) Pump 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 1921 ZONE Maximum coverage of lot by structures Permanent Foundation Required: YES_____NO SETBACKS: Front from property line (PL) or from center of ROW, whichever is greater Parking Req'mt ______ from PL, Rear from PL Special Conditions _ 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 mon-use of the building(s).

Applicant Signature -Department Approval Date

W/O No. Pump hous Additional water and/or sewer tap fee(s) are required: YES NO **Utility Accounting** Date

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

(White: Planning)

(Yellow: Customer)

(Pink: Building Department)

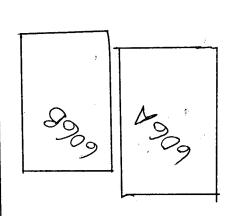
(Goldenrod: Utility Accounting)

John St.

ACCEPTED (+ dyl) John 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

SPRINGSIDE CT

X



Ong

LAVENDER CT

FPP-1997-032

