

FEE \$	10.00
TCP \$	0
SIF \$	292.00



BLDG PERMIT NO. 82861

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

AC

BLDG ADDRESS 2055 Spur Cross Rd TAX SCHEDULE NO. 2947-151-43-004
 SUBDIVISION INDEPENDENCE RANCH SQ. FT. OF PROPOSED BLDG(S)/ADDITION 3,300
 FILING 6 BLK 2 LOT 4 SQ. FT. OF EXISTING BLDG(S) _____
 (1) OWNER FRED Schwartze NO. OF DWELLING UNITS BEFORE: _____ AFTER: 1 THIS CONSTRUCTION
 (1) ADDRESS 714 Lockwood Way NO. OF BLDGS ON PARCEL BEFORE: _____ AFTER: 1 THIS CONSTRUCTION
 (1) TELEPHONE 6.J. 245-6143 USE OF EXISTING BLDGS _____
 (2) APPLICANT FISHER Const. DESCRIPTION OF WORK AND INTENDED USE: _____
 (2) ADDRESS 653 20 1/2 RD 6.J NEW HOUSE
 (2) TELEPHONE 234-6800

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 35%
 SETBACKS: Front 25' from property line (PL) Parking Req'mt 2
 or _____ from center of ROW, whichever is greater
 Side 10' from PL Rear 25' from PL Special Conditions _____
 Maximum Height 32' CENSUS 1402 TRAFFIC 88 ANN# _____

Modifications to this Planning Clearance must be approved, in writing, by the Director of 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 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).

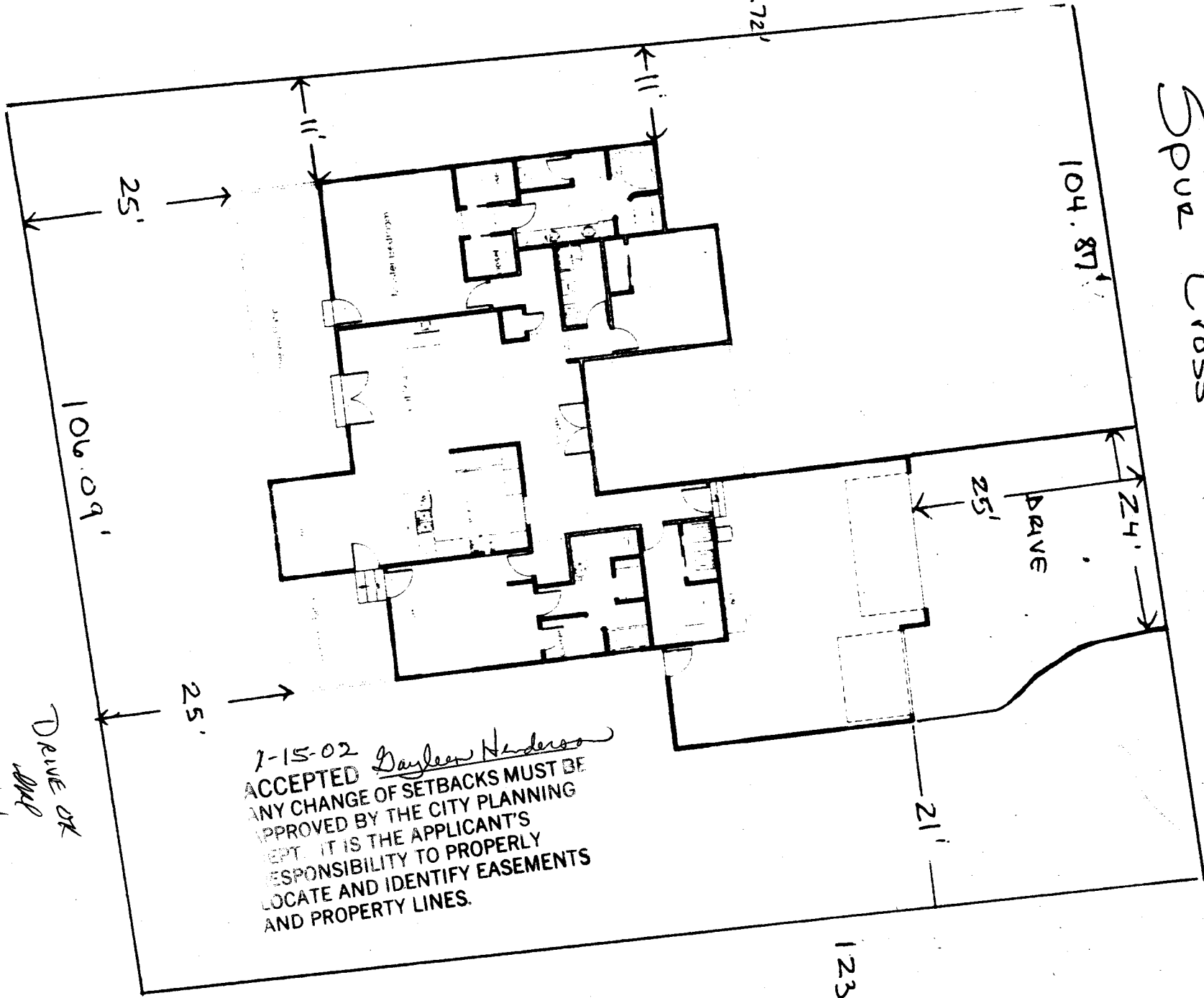
Applicant Signature [Signature] Date 1-10-02
 Department Approval [Signature] Date 1-15-02
 Additional water and/or sewer tap fee(s) are required: YES _____ NO _____ W/O No. 14505
 Utility Accounting Kate Elsberry Date 1/15/02

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)

2055

Spur Cross Rd

42861 *



124.72'

104.87'

DRIVE

25'

24'

21'

123.69'

25'

106.09'

25'

DRIVE OR
WALK

7-15-02 *Gayleen Henderson*
 ACCEPTED
 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.

Lot 4 Bk 2 Filling 6