

FEE \$	10.00
TCP \$	243.26
SIF \$	292.00

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

BLDG PERMIT NO. 90372



BLDG ADDRESS 2834 Acorn Ct.
 TAX SCHEDULE NO. 2943.303.102.006
 SUBDIVISION Arrowhead Acres II
 FILING 3 BLK 1 LOT 5
 (1) OWNER Pinnacle Homes, Inc.
 (1) ADDRESS 518 28 Rd. A-107
 (1) TELEPHONE 970.241.4646
 (2) APPLICANT Same as Above
 (2) ADDRESS _____
 (2) TELEPHONE _____

SQ. FT. OF PROPOSED BLDGS/ADDITION House-1958 garage-433
 SQ. FT. OF EXISTING BLDGS N/A
 TOTAL SQ. FT. OF EXISTING & PROPOSED House-1958 garage-433
 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction
 NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction
 USE OF EXISTING BUILDINGS N/A
 DESCRIPTION OF WORK & INTENDED USE New Home Construction
 TYPE OF HOME PROPOSED:
 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 RMF-5 Maximum coverage of lot by structures 60%
 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 25' from PL Parking Req'mt 2
 Maximum Height 35' Special Conditions _____
 CENSUS _____ TRAFFIC _____ 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).

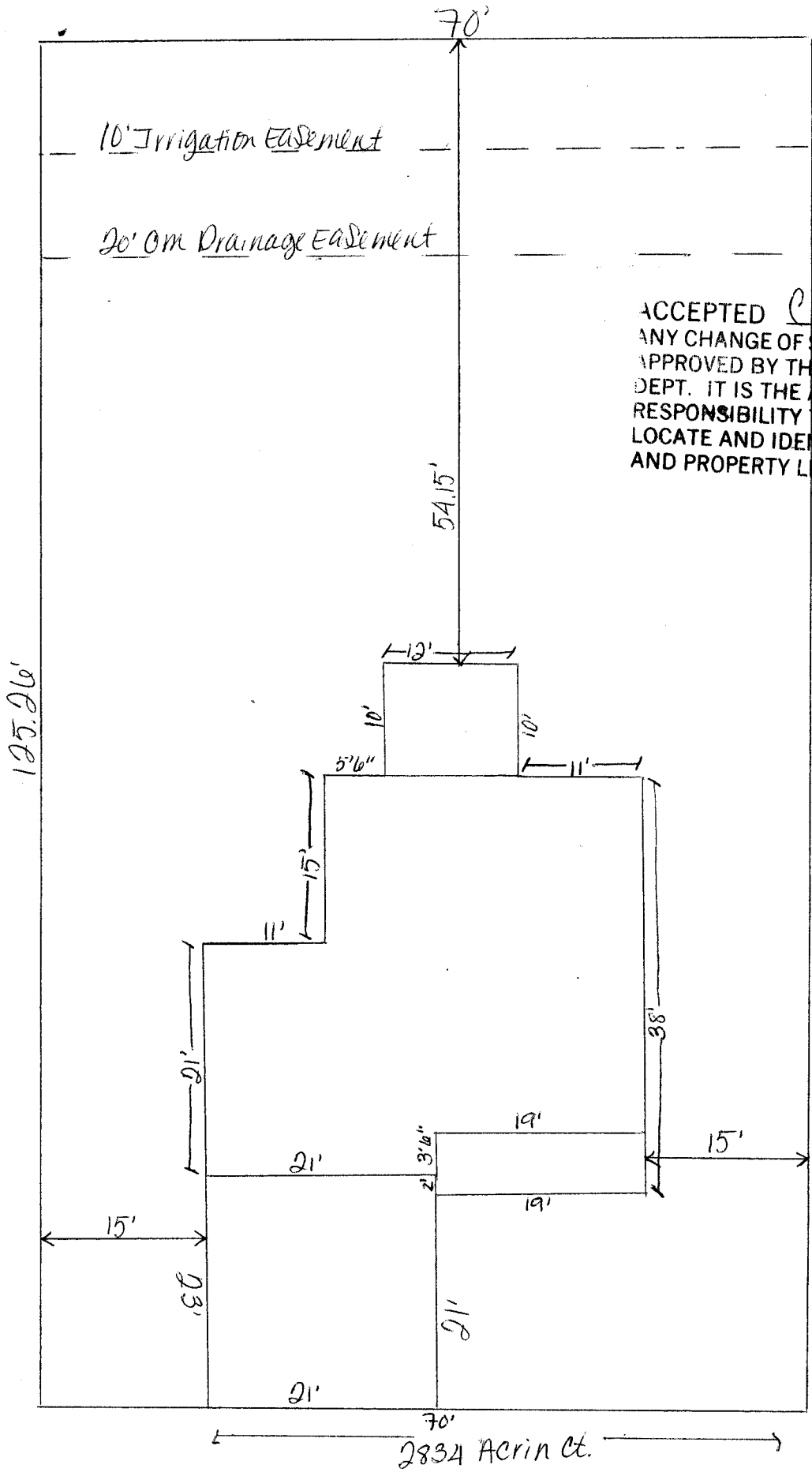
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily be limited to non-use of the building(s).

Applicant Signature Bill Grace by: [Signature] Date 7/9/03
 Department Approval NA C. Jay Nelson Date 7/17/03

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>OMSD</u>
Utility Accounting <u>CM Co</u>	Date <u>7/17/03</u>		

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)



7/17/03
 ACCEPTED *C. Fay Dubson*
 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.



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cu
 7/14/03

2834 Acrin Ct.
 Lot 5 Block 1 Tax Parcel # 2943.303.02.006
 Arrowhead Acres II filing 3