

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

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. _____



Your Bridge to a Better Community

56450-11808

BLDG ADDRESS 2001 Aspen St SQ. FT. OF PROPOSED BLDGS/ADDITION 351

TAX SCHEDULE NO. 2945-261-23-005 SQ. FT. OF EXISTING BLDGS 500

SUBDIVISION Om Heights TOTAL SQ. FT. OF EXISTING & PROPOSED 851

FILING 1 BLK _____ LOT 9 & 10 NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction

(1) OWNER Lonnie + Monica Smith NO. OF BUILDINGS ON PARCEL
 Before: 2 After: 2 this Construction

(1) ADDRESS 2001 Aspen St USE OF EXISTING BUILDINGS Residence

(1) TELEPHONE 245-5011 DESCRIPTION OF WORK & INTENDED USE Addition of
Bedroom, Bathroom & Hall

(2) APPLICANT _____ TYPE OF HOME PROPOSED:
 Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 _____ Other (please specify) _____

(2) ADDRESS _____

(2) TELEPHONE _____

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-8 Maximum coverage of lot by structures 70%

SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES NO _____
 or _____ from center of ROW, whichever is greater

Side 5' from PL, Rear 10' from PL Parking Req'mt 2

Maximum Height 35' Special Conditions _____

CENSUS _____ TRAFFIC _____ ANN# _____

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 Monica Smith Date 11-13-03

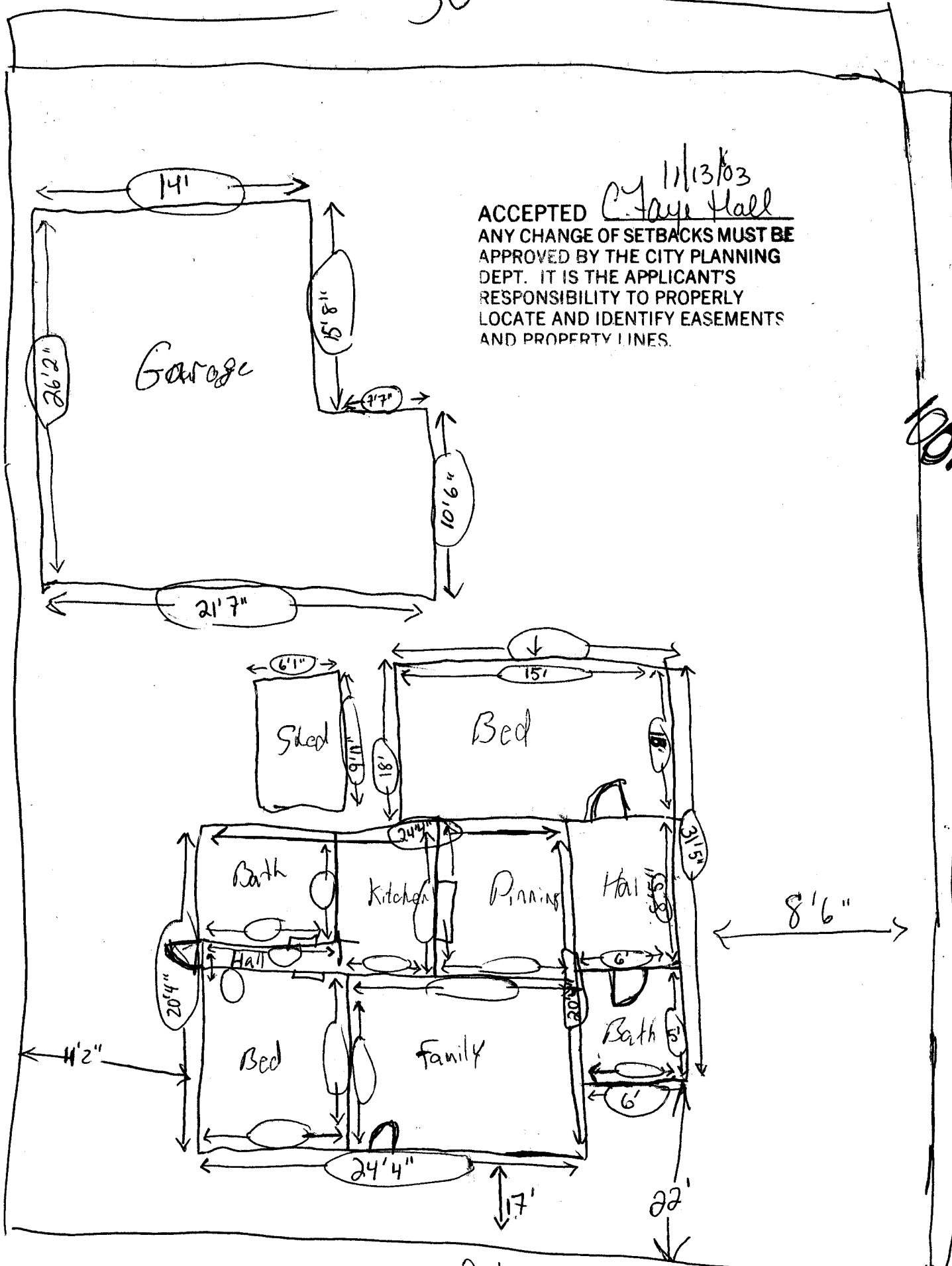
Department Approval C. Faye Gibson/Hall Date 11/13/03

Additional water and/or sewer tap fee(s) are required:	YES _____	NO <input checked="" type="checkbox"/>	W/O No. <u>intermediate</u>
Utility Accounting <u>Dotter/Panover</u>	Date <u>11-13-03</u>		<u>Addition</u>

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

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

50'



11/13/03
 ACCEPTED C. Jay Hall
 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.

105

Aspen St