

FEE \$ <u>10.00</u>
TCP \$
SIF \$

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. None



Your Bridge to a Better Community

43419-3087
 BLDG ADDRESS 2435 BELFORD

SQ. FT. OF PROPOSED BLDGS/ADDITION 140

TAX SCHEDULE NO. 2945-131-02-979

SQ. FT. OF EXISTING BLDGS 4,590

SUBDIVISION _____

TOTAL SQ. FT. OF EXISTING & PROPOSED 4,730

FILING _____ BLK _____ LOT _____

NO. OF DWELLING UNITS:
 Before: _____ After: _____ this Construction

(1) OWNER MESA DEVELOPMENTAL SVCS

NO. OF BUILDINGS ON PARCEL
 Before: 1 After: 2 this Construction

(1) ADDRESS 950 GRAND AVE

USE OF EXISTING BUILDINGS MESA DEVELOPMENTAL SVCS

(1) TELEPHONE 243-3702

DESCRIPTION OF WORK & INTENDED USE PUT 10X14 SHED IN

(2) APPLICANT SAME

TYPE OF HOME PROPOSED:
 Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify) 10X14 SHED

(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 C-1

Maximum coverage of lot by structures N/A

SETBACKS: Front 25' from property line (PL)
 or _____ from center of ROW, whichever is greater

Permanent Foundation Required: YES _____ NO X

Side 5' from PL, Rear 10' from PL

Parking Req'mt 2

Maximum Height 40'

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 Jennie Bell

Date 6-16-03

Department Approval Ashu Pragon

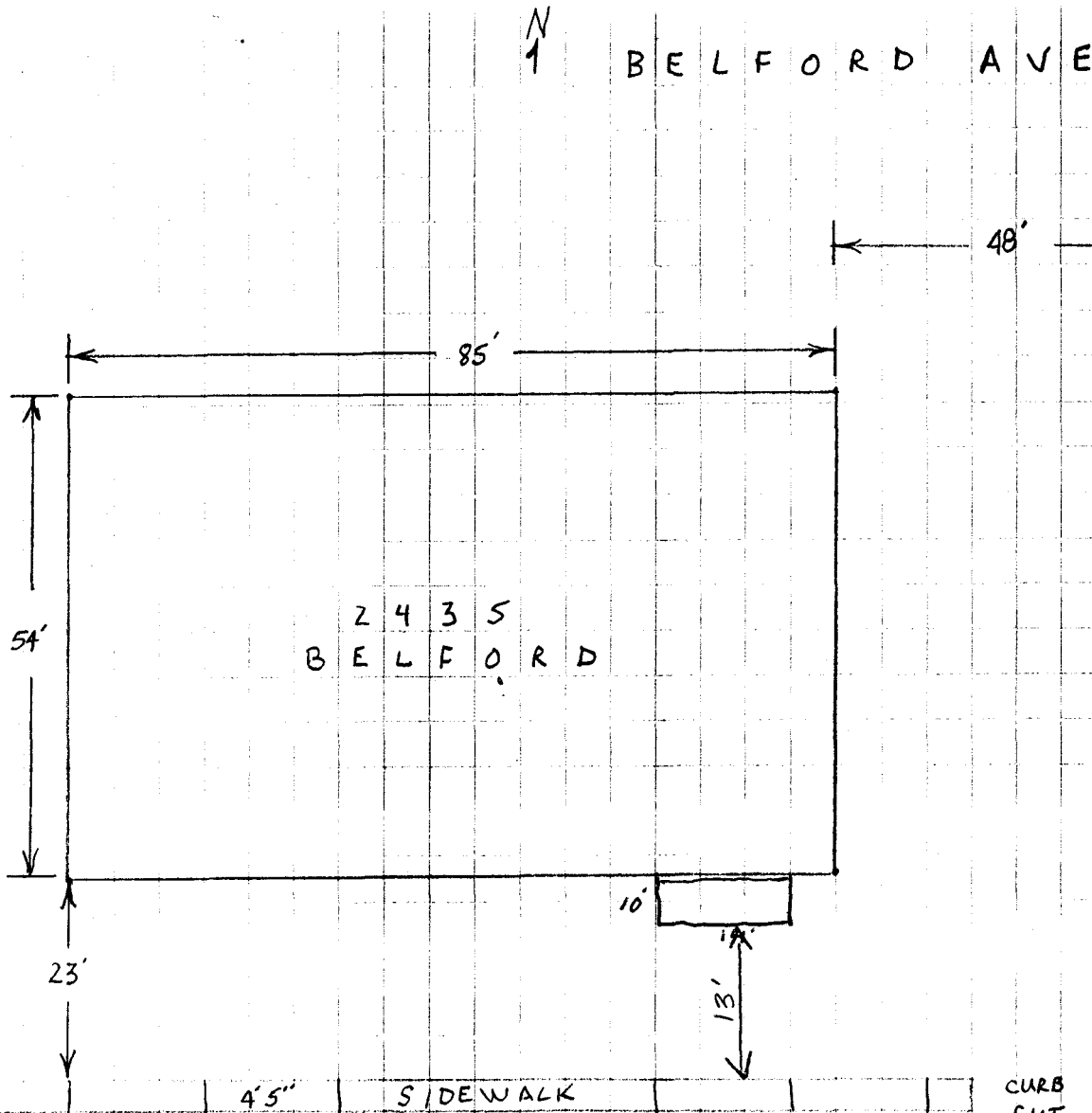
Date 6/16/03

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>no shed</u>
Utility Accounting	<u>D. Turner</u>	Date	<u>6-16-03</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)

24TH ST.



ACCEPTED
 ANY CHANGE OF SETBACKS MUST BE
 APPROVED BY THE CITY PLANNING
 DEPT. IT IS THE APPLICANT'S
 RESPONSIBILITY TO PROPERLY
 LOCATE AND IDENTIFY LINES
 AND PROPERTY LINES.

10/10/03



Dennis Bell
 Facilities Manager
 E-Mail: Dennis@mds.acsol.net
 CELL 261-0928

Mesa Developmental Services

950 Grand Avenue, Grand Junction, CO 81501
 (970) 243-3702 Fax (970) 243-7751 TTY (970) 243-7504

T E L L E R A V E

MESA DEVELOPMENTAL SERVICES