

FEE \$	10.00
TCP \$	500.00
SIF \$	292.00

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

BLDG PERMIT NO. 91166



Your Bridge to a Better Community

②

BLDG ADDRESS 424 BROKEN ARROW SQ. FT. OF PROPOSED BLDGS/ADDITION 1455

TAX SCHEDULE NO. 2943-174-25-015 SQ. FT. OF EXISTING BLDGS —

SUBDIVISION FLINT RIDGE TOTAL SQ. FT. OF EXISTING & PROPOSED 1455

FILING 2 BLK 4 LOT 15 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER TML ENTERPRISES INC NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS P.O. Box 2569 USE OF EXISTING BUILDINGS —

(1) TELEPHONE 245-9271 DESCRIPTION OF WORK & INTENDED USE New Home Constr.

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

(2) ADDRESS P.O. Box 2569

(2) TELEPHONE 245-9271

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 C 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 [Signature] Date 6/24/03

Department Approval [Signature] Date 9/17/03

Additional water and/or sewer tap fee(s) are required: <input checked="" type="checkbox"/> YES	NO	W/O No. <u>11572</u>
Utility Accounting <u>[Signature]</u>	Date <u>9/17/03</u>	

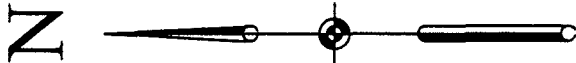
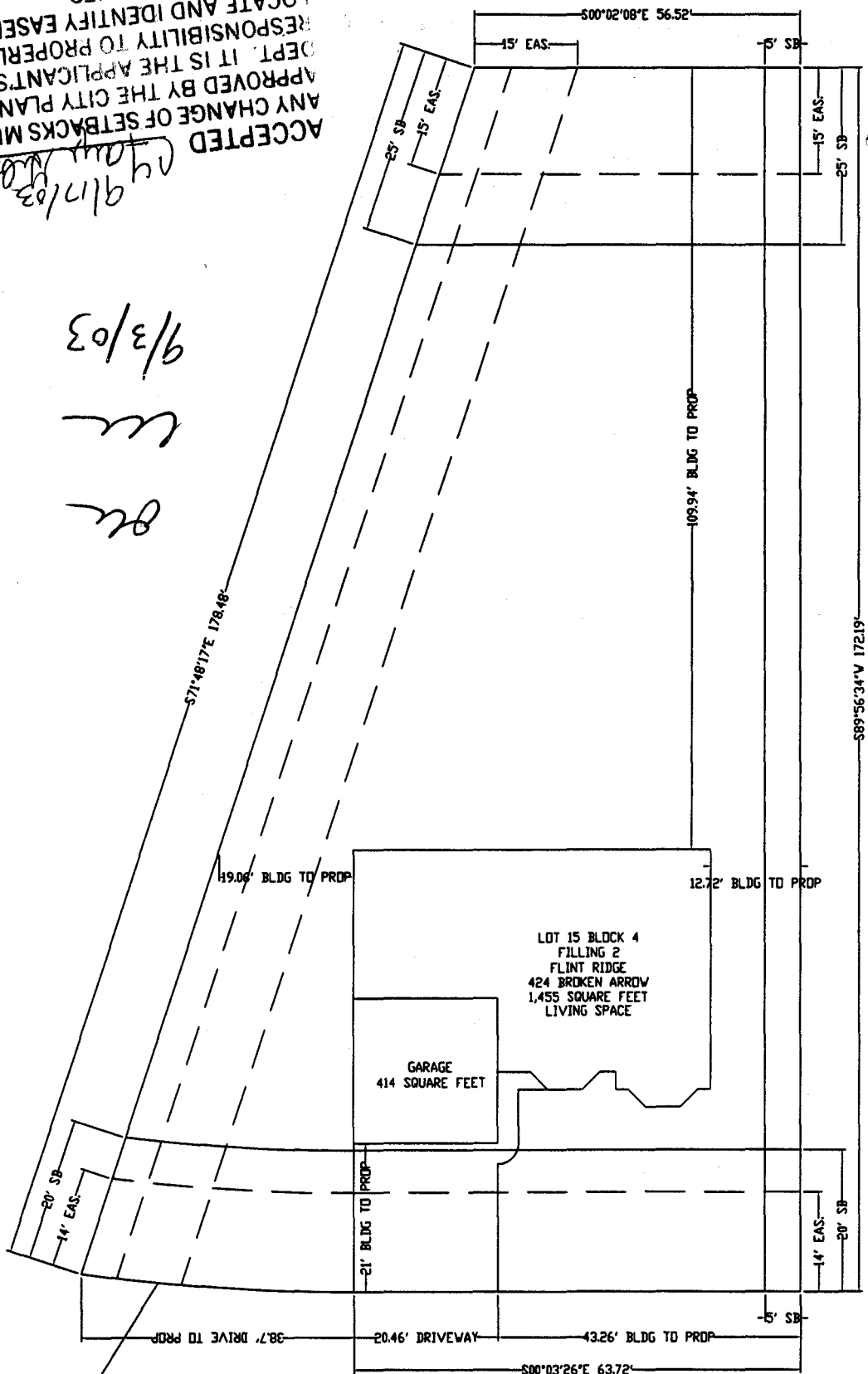
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

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

ACCEPTED
 BY CITY PLANNING DEPT. IT IS THE APPLICANTS RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.

*9/17/03
 City Planning*

*9/3/03
 W
 BK*



278' RADIUS

BROKEN ARROW DRIVE