

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

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

BLDG PERMIT NO. 89748



Your Bridge to a Better Community

BLDG ADDRESS 2625 Foxglove CT SQ. FT. OF PROPOSED BLDGS/ADDITION 1825
 TAX SCHEDULE NO. 2701-353-64-011 SQ. FT. OF EXISTING BLDGS 0
 SUBDIVISION 2620 G RD SUB TOTAL SQ. FT. OF EXISTING & PROPOSED 1825
 FILING 1 BLK 2 LOT 11 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction
 (1) OWNER Thomas & Nedra Lanum NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction
 (1) ADDRESS 2625 Foxglove CT USE OF EXISTING BUILDINGS _____
 (1) TELEPHONE 2410325 DESCRIPTION OF WORK & INTENDED USE SFR.
 (2) APPLICANT Custom Quality Homes TYPE OF HOME PROPOSED:
 (2) ADDRESS 2394 SAYRE DR. Site Built _____ Manufactured Home (UBC)
 (2) TELEPHONE 201-2371 _____ 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 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 _____
 B 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 Thomas Lanum Date 6-4-03
 Department Approval Blk Gayleen Henderson Date 6-4-03

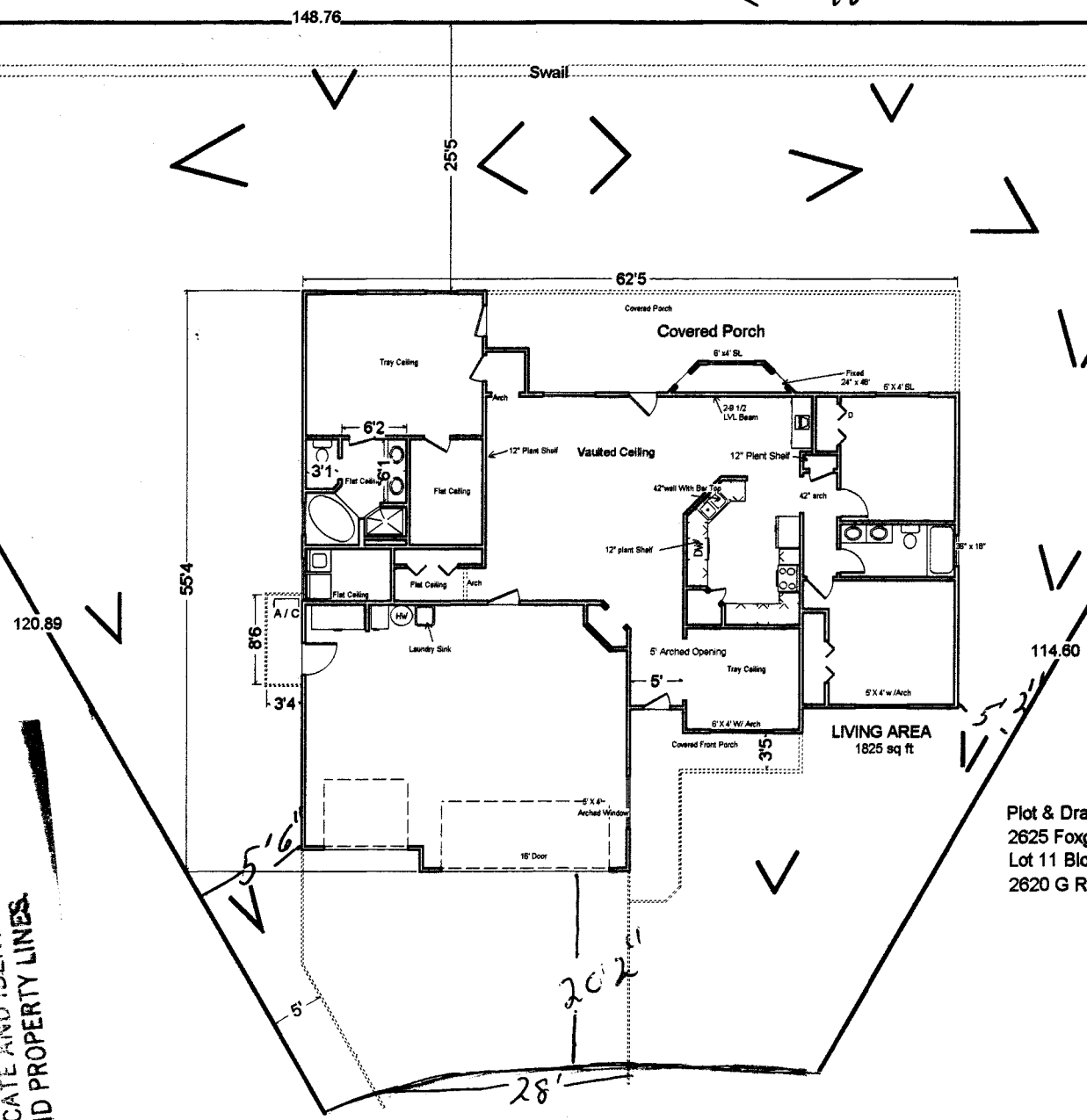
Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO	W/O No. <u>16157</u>
Utility Accounting <u>Kate Elsberry</u>	Date <u>6/6/03</u>		

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)

6-6-03 Daylen Henderson
ACCEPTED
 ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPARTMENT. THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.

← N



Plot & Drainage Plan
 2625 Foxglove Ct.
 Lot 11 Block 2 Ph 1
 2620 G Rd. Subdivision

Done OK
Rich Louis
 6-5-03