

FEE \$	10.00
TCP \$	Ø
SIF \$	Ø

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

BLDG PERMIT NO. <u>None</u>
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Your Bridge to a Better Community

BLDG ADDRESS 1640 Grand Ave SQ. FT. OF PROPOSED BLDGS/ADDITION 64'  
 TAX SCHEDULE NO. 2945132-18-011 SQ. FT. OF EXISTING BLDGS House 1040'  
 SUBDIVISION Shocomb Addition TOTAL SQ. FT. OF EXISTING & PROPOSED 1104  
 FILING \_\_\_\_\_ BLK 2 LOT \_\_\_\_\_  
 NO. OF DWELLING UNITS:  
 Before: \_\_\_\_\_ After: \_\_\_\_\_ this Construction  
 NO. OF BUILDINGS ON PARCEL  
 Before: \_\_\_\_\_ After: \_\_\_\_\_ this Construction  
 (1) OWNER Barbara Dockery  
 (1) ADDRESS 1640 Grand Ave  
 (1) TELEPHONE 970-245-7709  
 (2) APPLICANT Barbara Dockery  
 (2) ADDRESS \_\_\_\_\_  
 (2) TELEPHONE \_\_\_\_\_  
 USE OF EXISTING BUILDINGS \_\_\_\_\_  
 DESCRIPTION OF WORK & INTENDED USE Shed  
 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-8 Maximum coverage of lot by structures 70%  
 SETBACKS: Front 20'/25' from property line (PL) Permanent Foundation Required: YES \_\_\_\_\_ NO \_\_\_\_\_  
 or \_\_\_\_\_ from center of ROW, whichever is greater  
 Side 5'/3' from PL, Rear 10'/5' from PL Parking Req'mt \_\_\_\_\_  
 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 Barbara Dockery Date 3-26-03  
 Department Approval Dayle Henderson Date 3-26-03

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. _____
Utility Accounting	<u>[Signature]</u>		Date <u>3/26/03</u>

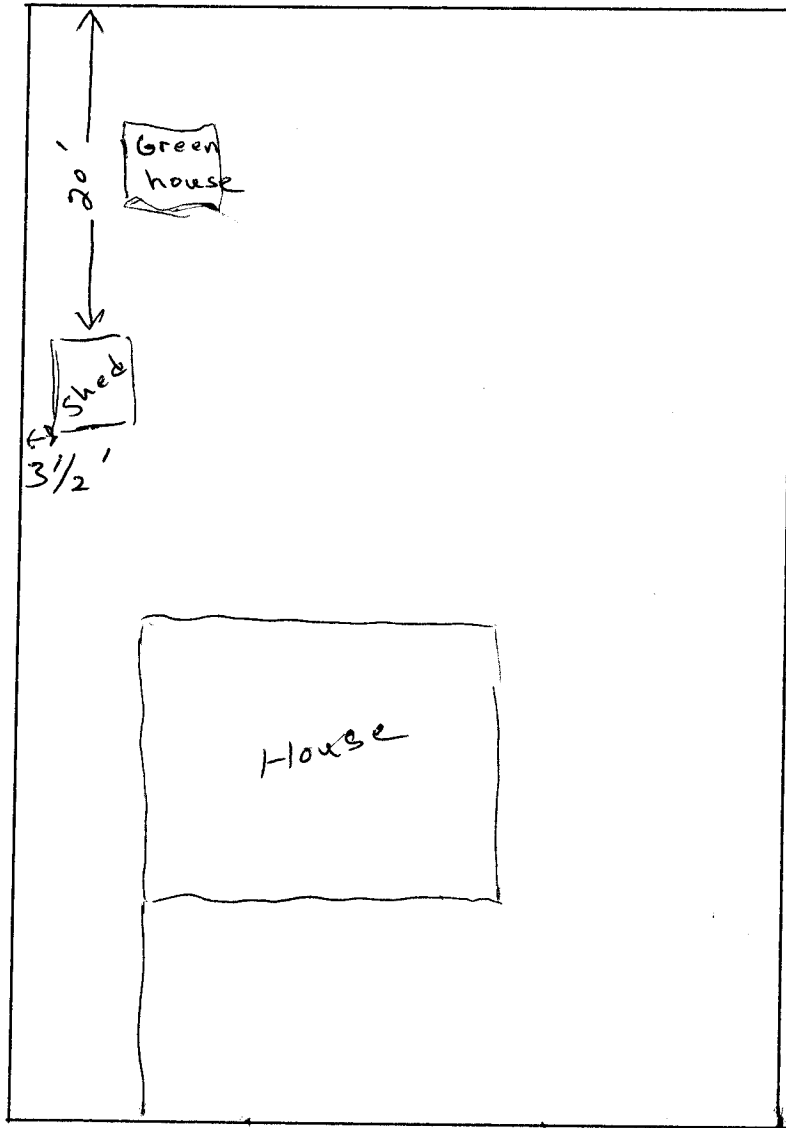
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

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

1640 Grand

3-26-03

ACCEPTED Dayleen Henderson  
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.



78'

125'

17th

GRAND