

FEE \$	5.00
TCP \$	/
SIF \$	/

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

BLDG PERMIT NO. 88400



Your Bridge to a Better Community

BLDG ADDRESS 475 Harris Rd SQ. FT. OF PROPOSED BLDGS/ADDITION \_\_\_\_\_

TAX SCHEDULE NO. 2943-181-00-021 SQ. FT. OF EXISTING BLDGS \_\_\_\_\_

SUBDIVISION \_\_\_\_\_ TOTAL SQ. FT. OF EXISTING & PROPOSED \_\_\_\_\_

FILING \_\_\_\_\_ BLK \_\_\_\_\_ LOT \_\_\_\_\_

NO. OF DWELLING UNITS:  
 Before: \_\_\_\_\_ After: \_\_\_\_\_ this Construction

NO. OF BUILDINGS ON PARCEL  
 Before: \_\_\_\_\_ After: \_\_\_\_\_ this Construction

(1) OWNER Grand Jet Pipe

(1) ADDRESS P.O. Box 1849

(1) TELEPHONE 243-4604

USE OF EXISTING BUILDINGS \_\_\_\_\_

(2) APPLICANT Skyline Contracting

DESCRIPTION OF WORK & INTENDED USE Demo

(2) ADDRESS 3191 Mesa Avenue

TYPE OF HOME PROPOSED:  
 \_\_\_\_\_ Site Built \_\_\_\_\_ Manufactured Home (UBC)  
 \_\_\_\_\_ Manufactured Home (HUD)  
 \_\_\_\_\_ Other (please specify) \_\_\_\_\_

(2) TELEPHONE 434-9121

**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 \_\_\_\_\_

SETBACKS: Front \_\_\_\_\_ from property line (PL)  
 or \_\_\_\_\_ from center of ROW, whichever is greater

Permanent Foundation Required: YES \_\_\_\_\_ NO \_\_\_\_\_

Side \_\_\_\_\_ from PL, Rear \_\_\_\_\_ from PL

Parking Req'mt \_\_\_\_\_

Maximum Height \_\_\_\_\_

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 Kelly Smith - Skyline Date 3/5/03

Department Approval Misha Magon Date 3/5/03

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>3/5/03</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)