

FEE \$	10.00
TCP \$	500.00
SIF \$	298.00

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

BLDG PERMIT NO. _____



Your Bridge to a Better Community

ACCOUNT # 2011-261340-42799-30-FILE400

BLDG ADDRESS 854 Haven Crest Court SQ. FT. OF PROPOSED BLDGS/ADDITION 3099

TAX SCHEDULE NO. 2701-261-39-005 SQ. FT. OF EXISTING BLDGS - 0 -

SUBDIVISION Summer Hill Subdivision TOTAL SQ. FT. OF EXISTING & PROPOSED 3099

FILING 3 BLK 2 LOT 5

NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER TOFT CONSTRUCTION INC.

NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS 2692 Haven Hill Dr

USE OF EXISTING BUILDINGS SFR

(1) TELEPHONE 243-1357 / 216-0676

DESCRIPTION OF WORK & INTENDED USE Build SFR

(2) APPLICANT _____

TYPE OF HOME PROPOSED:
 Site Built Manufactured Home (UBC)

(2) ADDRESS Same

Manufactured Home (HUD)
 Other (please specify) _____

(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 PD

Maximum coverage of lot by structures 30%

SETBACKS: Front 20' from property line (PL)
 or _____ from center of ROW, whichever is greater

Permanent Foundation Required: YES NO

Side 10' from PL, Rear 30' from PL

Parking Req'mt 2

Maximum Height 32'

Special Conditions Approval Ltr required from Lic eng.

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 [Signature]
 Department Approval _____

Date 9/18/03
 Date _____

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No.
Utility Accounting	Date		

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

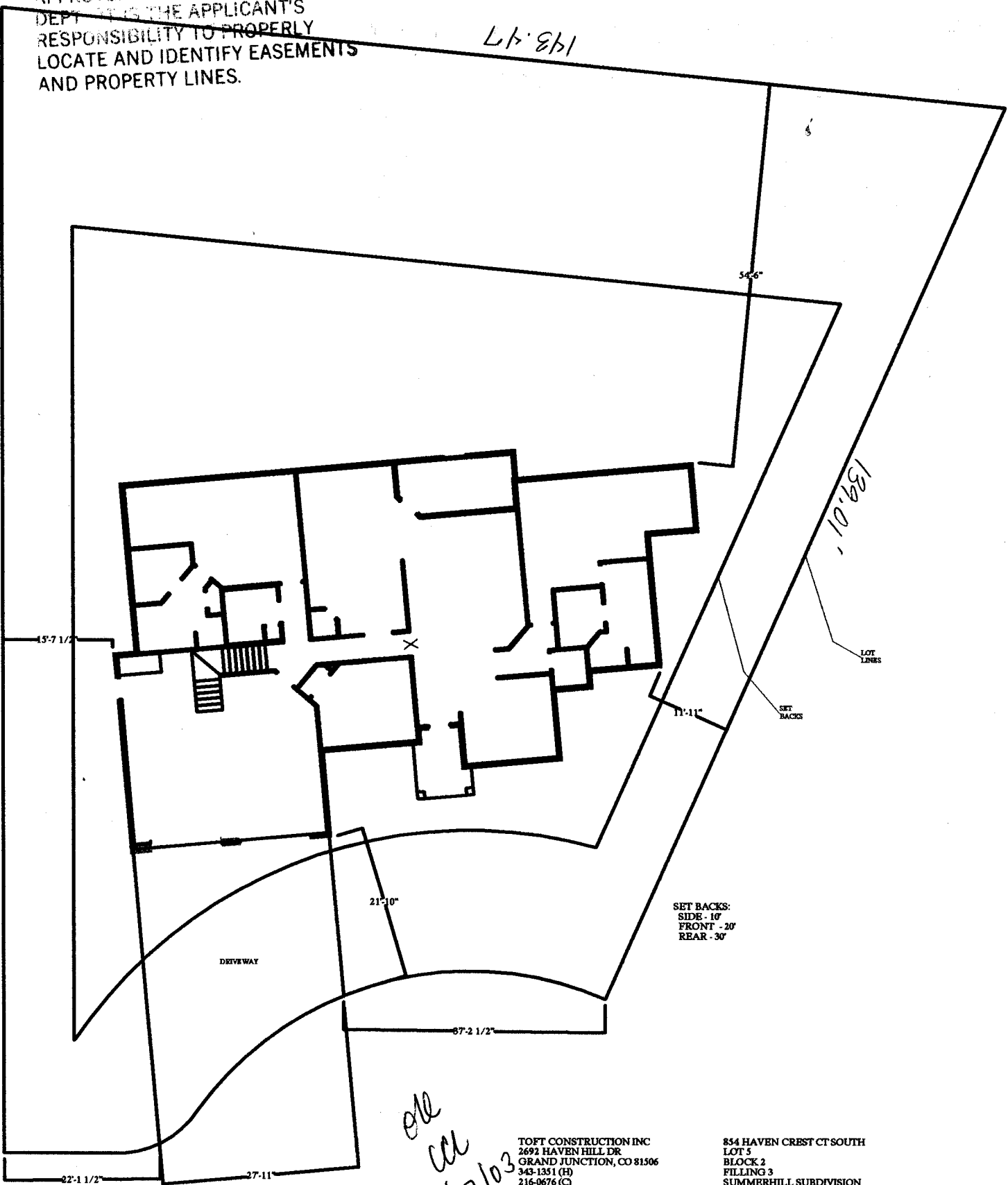
(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

ACCEPTED
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.

Wendy Spurr

Lt. 8/1

102.82



*edc
ccc
9/17/03*

TOFT CONSTRUCTION INC
2692 HAVEN HILL DR
GRAND JUNCTION, CO 81506
343-1351 (H)
216-0676 (C)

854 HAVEN CREST CT SOUTH
LOT 5
BLOCK 2
FILLING 3
SUMMERHILL SUBDIVISION