

FEE \$ <u>10.00</u>
TCP \$
SIF \$

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

BLDG PERMIT NO. _____



21606-13735
Building Address 2270 Holland Dr.
Parcel No. 2945-074-19-005
Subdivision Redacho
Filing _____ Block _____ Lot _____

No. of Existing Bldgs 3 Proposed 0
Sq. Ft. of Existing Bldgs _____ Proposed _____
Sq. Ft. of Lot / Parcel _____
Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____

OWNER INFORMATION:

Name Peggy Vaughn
Address 2270 Holland Dr.
City / State / Zip 241-4695

DESCRIPTION OF WORK & INTENDED USE:

New Single Family Home (*check type below)
 Interior Remodel Addition
 Other (please specify): _____

APPLICANT INFORMATION:

Name Stacie Fugher-Jolly
Address 431 South Comp
City / State / Zip 650081503
Telephone 254-8777

***TYPE OF HOME PROPOSED:**

Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): _____

NOTES: Bedroom & enclosed patio addition

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 RSF-4 Maximum coverage of lot by structures 50%
SETBACKS: Front 20/25 from property line (PL) Permanent Foundation Required: YES X NO _____
Side 7/3 from PL Rear 25/5 from PL Parking Requirement 2
Maximum Height of Structure(s) 35' Special Conditions _____
Voting District _____ Driveway Location Approval _____
(Engineer's Initials)

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 11-3-03
Department Approval [Signature] Date 11/2/03

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>addition</u>
Utility Accounting <u>[Signature]</u>	Date <u>Nov 3, 2003</u>		


VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning & Development Code)
(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

City of Grand Junction GIS Zoning Map ©

Airport Zones

- AIRPORT RO/
- - CLEAR ZONE
- CRITICAL ZON
- RUNWAY 22
- RUNWAY 29
- TAXI WAY

Air Photos

-  2002 Photos
- Streets 2



SCALE 1 : 924

