

FEE \$	10.00
TCP \$	0
SIF \$	292.00

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO. _____



Your Bridge to a Better Community

BLDG ADDRESS 469 ~~455~~ JoAnn Ct SQ. FT. OF PROPOSED BLDGS/ADDITION 1656

TAX SCHEDULE NO. 2943-161-00-217 SQ. FT. OF EXISTING BLDGS 0

SUBDIVISION Iles TOTAL SQ. FT. OF EXISTING & PROPOSED 1656

FILING _____ BLK 2 LOT 8 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER Lisa Cook NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS 1102 Belford Unit C USE OF EXISTING BUILDINGS N/A

(1) TELEPHONE 241-2871 x 106 DESCRIPTION OF WORK & INTENDED USE Single Family Res.

(2) APPLICANT SAME TYPE OF HOME PROPOSED:
 Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 _____ Other (please specify) _____

(2) ADDRESS _____

(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 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 _____

CENSUS C 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] Date 11/12/03

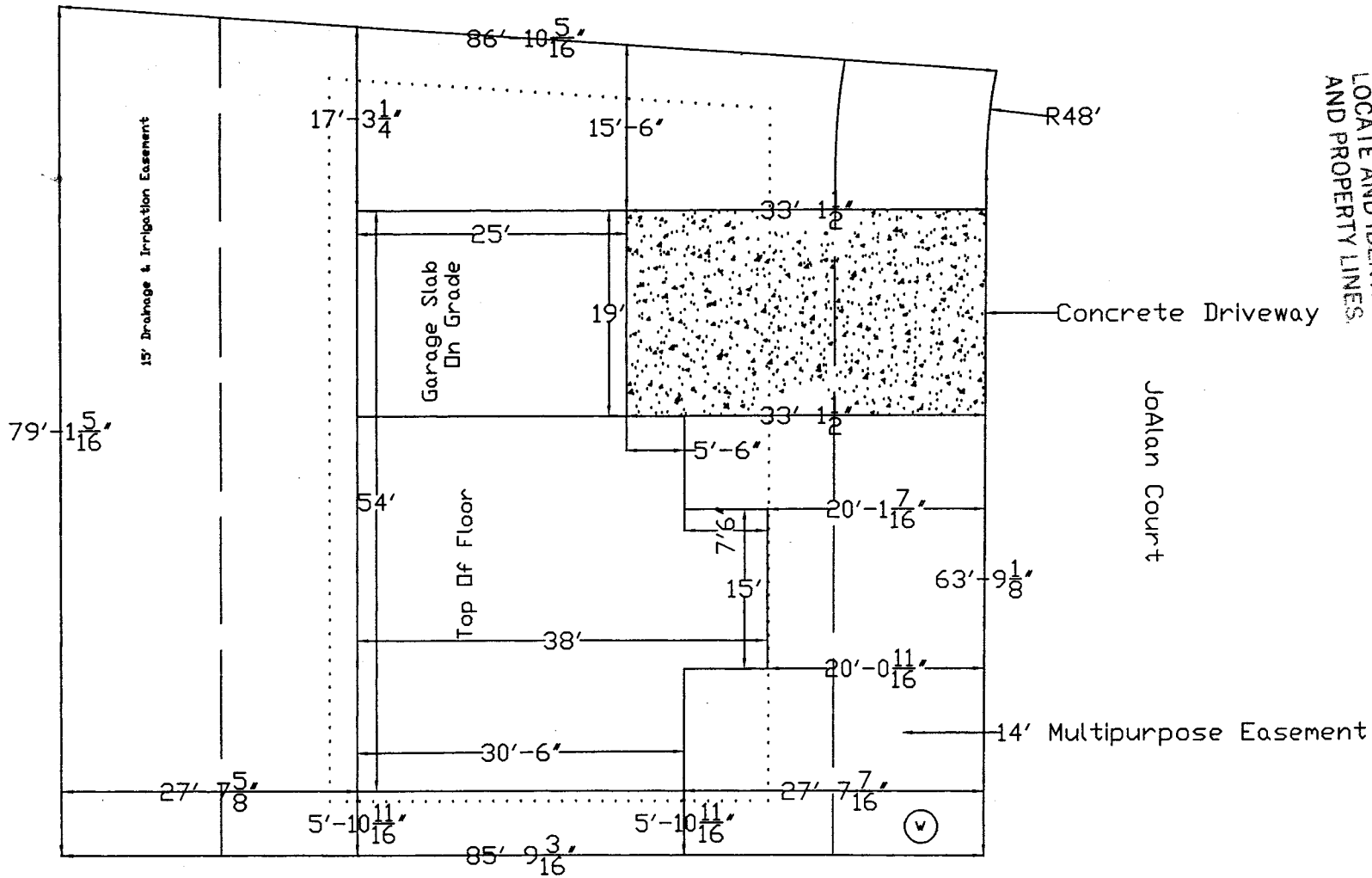
Department Approval [Signature] Date 12-1-03

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO	W/O No. <u>16778</u>
Utility Accounting	<u>[Signature]</u>	Date	<u>12-1-03</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)

DATE	APPROVED
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12-1-03
 ACCEPTED *Gayle Henderson*
 ANY CHANGES TO THIS PLAN MUST BE
 APPROVED BY THE CITY PLANNING
 DEPT. BEFORE THE CONTRACTOR'S
 RESPONSIBILITY TO PROPERTY
 LOCATE AND IDENTIFY EASEMENTS
 AND PROPERTY LINES.

11/14/03
W
W

	Cook Residence	
	469 Jordan Ct.	
Lot 8 Block 2	Isles Subdivision	SQ.FT. 6527
	SCALE	Housing Resources

W