TCP\$ 500 CO SIF\$ 992 CO

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

BLDG PERMIT NO. 89UU/



Your Bridge to a Better Community

(Goldenrod: Utility Accounting)

BLDG ADDRESS 230 A LAGGED CT	SQ. FT. OF PROPOSED BLDGS/ADDITION //J/3
TAX SCHEDULE NO. 2701-334-16-002	SQ. FT. OF EXISTING BLDGS
SUBDIVISION FOUNTAIN GROOMS SUB	TOTAL SQ. FT. OF EXISTING & PROPOSED /353
OWNER FUNTAIN GROW LLC 1655 WALNUT ST SUTO 300	NO. OF DWELLING UNITS: Before: After: this Construction NO. OF BUILDINGS ON PARCEL Before: After: this Construction
(1) ADDRESS BOLDER (0 80802	USE OF EXISTING BUILDINGS
(1) TELEPHONE (303) 4/2 - 3375	DESCRIPTION OF WORK & INTENDED USE SUGGE FARMER AND
(2) APPLICANT STATE (2) ADDRESS POR 1247 (2) TELEPHONE 245-9008	TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC) Manufactured Home (HUD) Other (please specify)
	ill existing & proposed structure location(s), parking, setbacks to all cation & width & all easements & rights-of-way which abut the parcel.
THIS SECTION TO BE COMPLETED BY COZONE ρ_0	Maximum coverage of lot by structures
SETBACKS: Front from property line (PL) or from center of ROW whiteflever is greater from PL, Rear from Pl	Permanent Foundation Required: YES_XNO Parking Req'mt
Maximum Height	Special Conditions
	6 CENSUS TRAFFIC ANNX#
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 action, which may include but not necessarily be limited to	the project. I understand that failure to comply shall result in legal p non-use of the building(s).
Applicant Signature	Date 5/28/03
Department Approval NA Dayleen Handen	Date 6-4-03
Additional water and/er-sewer tap fee(s) are required:	YES NO W/O No. // 14/
Utility Accounting) / / / / / / / / / / / / / / / / / /	Date / /// 2
	6/4/03

(Pink: Building Department)

