

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

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

BLDG PERMIT NO. None



Your Bridge to a Better Community

OM Sanitation

BLDG ADDRESS 2833 MAVERICK DR SQ. FT. OF PROPOSED BLDGS/ADDITION 1209 FT
 TAX SCHEDULE NO. 2943-303-67-005 SQ. FT. OF EXISTING BLDGS 13108
 SUBDIVISION ARROWHEAD II TOTAL SQ. FT. OF EXISTING & PROPOSED 1488
 FILING 2 BLK 4 LOT 5 NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction
 NO. OF BUILDINGS ON PARCEL
 Before: 1 After: 2 this Construction
 (1) OWNER BASIL B. ILL & CAROL F. SWATZELL
 (1) ADDRESS 2833 MAVERICK DR G.S. USE OF EXISTING BUILDINGS Home
 (1) TELEPHONE 970-241-3008 DESCRIPTION OF WORK & INTENDED USE Shed
 (2) APPLICANT SAME TYPE OF HOME PROPOSED:
 (2) ADDRESS SAME Site Built Manufactured Home (UBC)
 (2) TELEPHONE SAME Manufactured Home (HUD)
 Other (please specify) _____

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 6090
 SETBACKS: Front 25' from property line (PL) Permanent Foundation Required: YES NO
 or _____ from center of ROW, whichever is greater
 Side 3' from PL, Rear 5' from PL Parking Req'mt _____
 Maximum Height 35' Special Conditions _____
 CENSUS _____ TRAFFIC _____ ANNEX# _____

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 _____ Date _____
 Department Approval C. Faye Gibson Date 4/18/03

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No.
Utility Accounting	<u>Attendants</u>		Date <u>4-18-03</u>

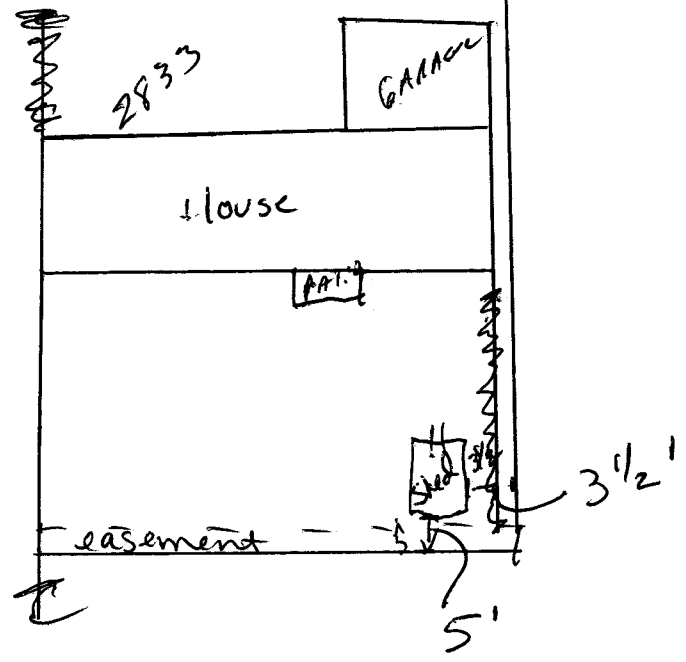
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

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

1962/10/22

B 1/2 Rd

MAVERICK DR



4/18/03
 ACCEPTED C. Lynn Gibson
 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.