FEE \$ 10.00 PLANNING CLEAR	
TCP \$ (Single Family Residential and Acces	
SIF \$ 292.00 Community Development	
	Your Bridge to a Better Community
BLDG ADDRESS 2334 MERIDIAN COUNTSQ. FT	. OF PROPOSED BLDGS/ADDITION <u>3488</u>
TAX SCHEDULE NO. 2945 203 55 002 SQ. FT	. OF EXISTING BLDGS
SUBDIVISION <u>REDLANDS MESA</u> TOTAL	SQ. FT. OF EXISTING & PROPOSED 3488
	F DWELLING UNITS
	: After: this Construction F BUILDINGS ON PARCEL
(1) ADDRESS HIL POWER DE FUER (1)	: After: this Construction
USE O	FEXISTING BUILDINGS
"TELEPHONE	RIPTION OF WORK & INTENDED USE HOME CONSTRUCTION
<sup>(2)</sup> APPLICANT <u>CASTLE KOCK CONSTRUCTION</u>	• •
<sup>(2)</sup> ADDRESS PO BOX 1533 PAUSADE CO X	OF HOME PROPOSED:Site Built Manufactured Home (UBC)
<sup>(2)</sup> TELEPHONE <u>970/234-2400</u>	Manufactured Home (HUD) Other (please specify)
REQUIRED: One plot plan, on 8 ½" x 11" paper, showing all existing property lines, ingress/egress to the property, driveway location &	ng & proposed structure location(s), parking, setbacks to all
THIS SECTION TO BE COMPLETED BY COMMUN	
55	@-
ZONE <u>PD</u>	Maximum coverage of lot by structures $35\%$
SETBACKS: Front from property line (PL) or from center of ROW, whichever is greater	Permanent Foundation Required: YES <u>V</u> NO
Side <u>15</u> from PL, Rear <u>30</u> from PL	Parking Req'mt _2
	Special Conditions
Maximum Height <u>32</u>	CENSUS TRAFFIC ANNX#
Modifications to this Planning Clearance must be approved, in v structure authorized by this application cannot be occupied until Occupancy has been issued, if applicable, by the Building Depar	a final inspection has been completed and a Certificate of
I hereby acknowledge that I have read this application and the info ordinances, laws, regulations or restrictions which apply to the pro action, which may include but not necessarily be limited to non-u	pject. I understand that failure to comply shall result in legal
Applicant Signature	Date <u>8-18-03</u>
Department Approval AIR, Fayl D. Org	Date 8125/03
Additional water and/or sewer tap fee(s) are required: YES	NO W/O No. /6473

Utility Accounting	)	Konova	Date	$\sum$	1	28	10	3
VALID FOR SIX MON	ÍHS F	OM DATE OF ISSUANCE (Section 9-3-2C	Grand Junct	ion	Zor	ning & Dev	elopmer	nt Code)

(White: Planning)	(Yellow: Customer)	(Pink: Building Department)
	• •	

(Goldenrod: Utility Accounting)

