

FEE \$	10.00
TCP \$	500.00
SIF \$	292.00

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

BLDG PERMIT NO. 88896



Your Bridge to a Better Community

BLDG ADDRESS 640 PINENEEDLE CT SQ. FT. OF PROPOSED BLDGS/ADDITION ^(House + garage) 2885

TAX SCHEDULE NO. 2945-023-25-003 SQ. FT. OF EXISTING BLDGS 0

SUBDIVISION Four Pines TOTAL SQ. FT. OF EXISTING & PROPOSED 2885

FILING 1 BLK 1 LOT 3 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER STUDEBAKER HOMES, LLC NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS P.O. Box 4614 USE OF EXISTING BUILDINGS N/A

(1) TELEPHONE 970-216-1463 DESCRIPTION OF WORK & INTENDED USE Construction of Residential House

(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 RSF-2 Maximum coverage of lot by structures 30%

SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES NO
 or _____ from center of ROW, whichever is greater

Side 15' from PL, Rear 30' from PL Parking Req'mt 2

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 [Signature] Date MARCH 28, 2003

Department Approval Gayleen Henderson Date 3-31-03

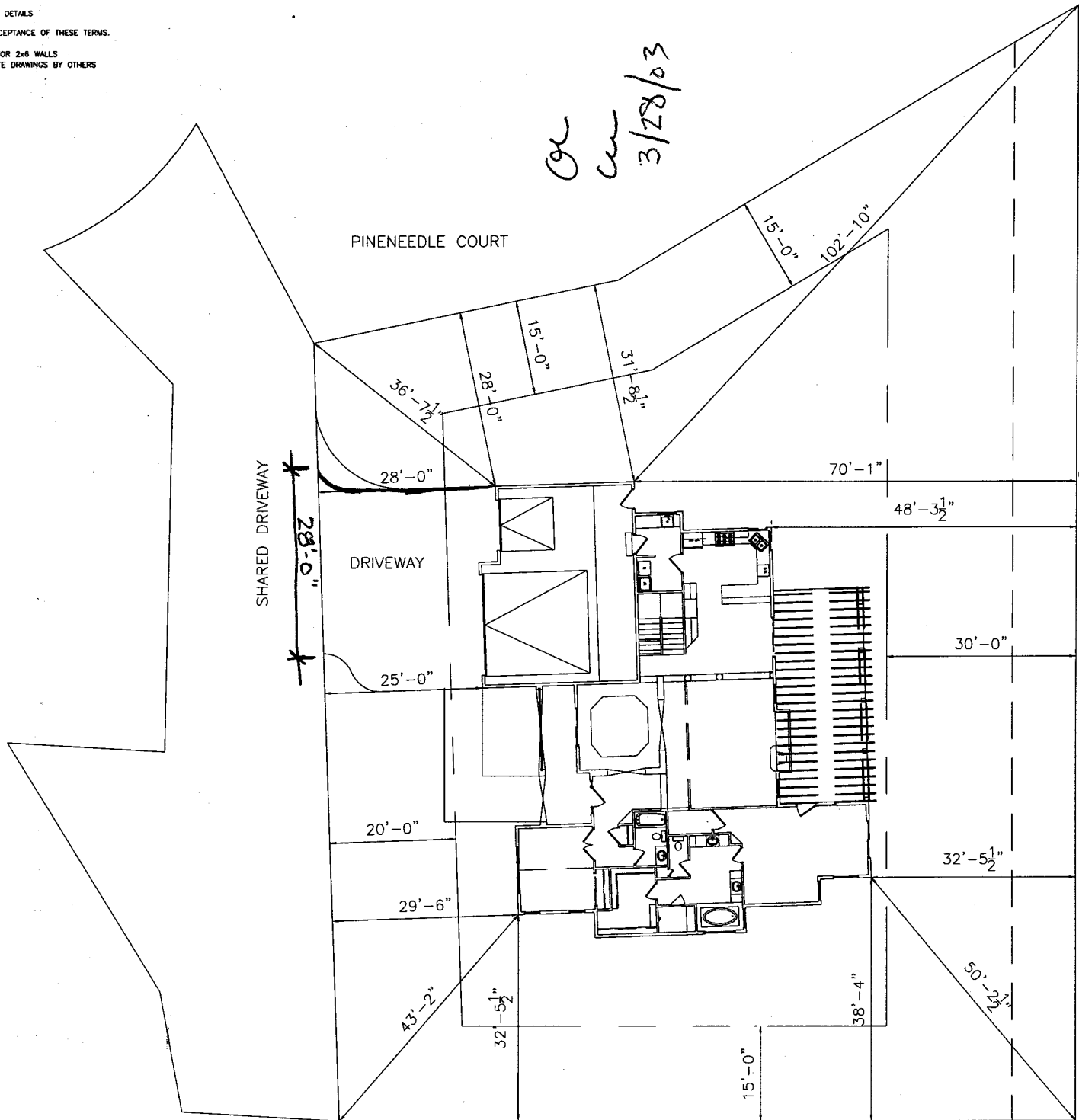
Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>18881</u>
Utility Accounting <u>[Signature]</u>	Date <u>3/31/03</u>		

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)

OWNER TO VERIFY ALL DETAILS.
) OR HOME OWNERS ACCEPTANCE OF THESE TERMS.
)S OTHER WISE NOTED.
 4 WALLS AND 5-1/2" FOR 2x6 WALLS.
)TODRAFT. SEE SEPARATE DRAWINGS BY OTHERS

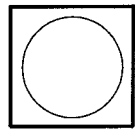
OC
CC
3/28/03



3-31-03
Gayleann Henderson
ACCEPTED
 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.

REVISIONS	
A	
B	
C	
D	
E	
F	
G	
H	

AutodRAFT
 COMPUTER AIDED DRAFTING
 GRAND JUNCTION, CO (970) 241-6782



FOUR PINES SUBDIVISION
LOT 3 SITE PLAN

DRAWN BY	
AUTODRAFT	
FILE NAME	
DATE	
2-12-03	
SCALE	
1/4" = 1'-0"	
SHEET	
SHEET 1	