

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

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

BLDG PERMIT NO. 89514



Your Bridge to a Better Community

BLDG ADDRESS 2960 A Red Cloud SQ. FT. OF PROPOSED BLDGS/ADDITION 1325  
 TAX SCHEDULE NO. 2943-174-20-011 SQ. FT. OF EXISTING BLDGS —  
 SUBDIVISION FLINT RIDGE TOTAL SQ. FT. OF EXISTING & PROPOSED 1325  
 FILING 2 BLK 4 LOT 4 NO. OF DWELLING UNITS:  
 Before: 0 After: 1 this Construction  
 (1) OWNER TML ENTERPRISES INC NO. OF BUILDINGS ON PARCEL  
 Before: 0 After: 1 this Construction  
 (1) ADDRESS PO Box 2569 USE OF EXISTING BUILDINGS —  
 (1) TELEPHONE (970) 245-9271 DESCRIPTION OF WORK & INTENDED USE New Home Const.  
 (2) APPLICANT TML ENTERPRISES INC TYPE OF HOME PROPOSED:  
 (2) ADDRESS (970) 245-9271  Site Built  Manufactured Home (UBC)  
 (2) TELEPHONE PO Box 2569  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-8 Maximum coverage of lot by structures 7090  
 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 10' from PL Parking Req'mt 2  
 Maximum Height 35' Special Conditions \_\_\_\_\_  
 CENSUS \_\_\_\_\_ 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 4/15/03  
 Department Approval [Signature] Date 5/5/03 6/30/03

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>76018</u>
Utility Accounting	<u>[Signature]</u>	Date	<u>5-5-03</u>

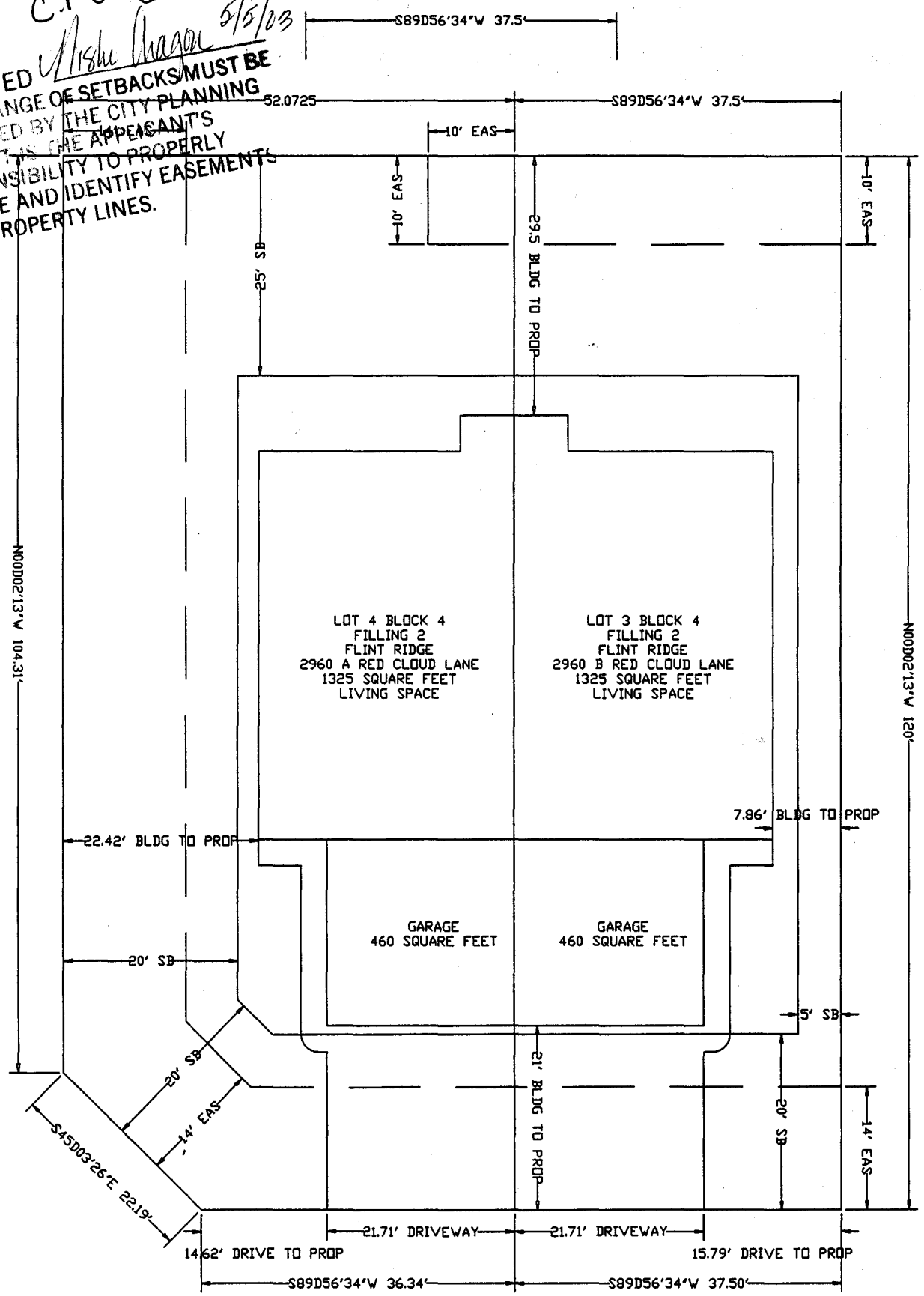
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

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

C.F. 6/5/03  
 Alisa Nagar 5/5/03  
**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.



BROKEN ARROW



RED CLOUD LANE

oc  
 w  
 4/16/03