FEE\$	10.00
TCP\$	500.00
	292.00

PLANNING CLEARANCE

BLDG PERMIT NO. 89184

(Single Family Residential and Accessory Structures)

Community Development Department



our Bridge to a Better Community

BLDG ADDRESS 2961 B Red Cloyd CA	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 /325	
FILING Z BLK Z LOT 14	NO. OF DWELLING UNITS: Before:	
(1) OWNER THE ENT. THE	NO. OF BUILDINGS ON PARCEL Before: After: this Construction	
(1) ADDRESS P.O. Box 2569		
(1) TELEPHONE 245- 9271	USE OF EXISTING BUILDINGS	
(2) APPLICANT TML ENT INC	DESCRIPTION OF WORK & INTENDED USE New home Coust	
(2) ADDRESS PO BOX 2569	TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC) Manufactured Home (HUD)	
(2) TELEPHONE 2 45 - 927/	Other (please specify)	
	all 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 C	OMMUNITY DEVELOPMENT DEPARTMENT STAFF 🖘	
ZONE RMF-8	Maximum coverage of lot by structures 70%	
SETBACKS: Front from property line (PL) or from center of ROW, whichever is greater	Permanent Foundation Required: YESNO	
Side $0'/5'$ from PL, Rear $10'$ from P	Parking Req'mt <u> </u>	
Maximum Height 35'	Special Conditions	
	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 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		
	Clalia	
Department Approval 1818 4/1814 Maga	$\frac{\mathcal{M}}{\mathcal{M}} \qquad \text{Date} \qquad \frac{3/3/03}{16.016}$	
Additional water and/or sewer tap fee(s) are required:	YES NO W/O No. 107478	
Utility Accounting Caracter	Date 5-5-03	

