

FEE \$	70.00
TCP \$	0
SIF \$	0

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

BLDG PERMIT NO. _____



Your Bridge to a Better Community

Building Address 2652 Sacoma Ct
Parcel No. 2701-354-30-001
Subdivision Nina Mae
Filing _____ Block _____ Lot 1

No. of Existing Bldgs 1 Proposed _____
Sq. Ft. of Existing Bldgs 192 Proposed _____
Sq. Ft. of Lot / Parcel _____
Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____

OWNER INFORMATION:

Name ROGER and CAROLYN Campbell
Address 2652 SACOMA CT
City / State / Zip GRAND JUNCTION

DESCRIPTION OF WORK & INTENDED USE:

- New Single Family Home (*check type below)
 Interior Remodel Addition
 Other (please specify): Storage shed

APPLICANT INFORMATION:

Name Same
Address _____
City / State / Zip _____
Telephone 256-7474

***TYPE OF HOME PROPOSED:**

- Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): _____

NOTES: _____

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 <u>RSF-2</u>	Maximum coverage of lot by structures <u>30%</u>
SETBACKS: Front <u>20'/25'</u> from property line (PL)	Permanent Foundation Required: YES <input checked="" type="checkbox"/> NO _____
Side <u>15'/3'</u> from PL Rear <u>30'/5'</u> from PL	Parking Requirement <u>2</u>
Maximum Height of Structure(s) <u>35'</u>	Special Conditions _____
Voting District _____	Driveway Location Approval _____ (Engineer's Initials)

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 Roger Campbell Date 12-9-03
Department Approval Bayleen Henderson Date 12-9-03

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No. <u>Shed only</u>
Utility Accounting <u>[Signature]</u>	Date <u>12-9-03</u>		

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning & Development Code)
(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

City of Grand Junction GIS Zoning Map ©



Sacoma ct

12-9-03 Hughes 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.