

FEE \$	10.00
TCP \$	None
SIF \$	292.00

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

BLDG PERMIT NO. 88645



Your Bridge to a Better Community

BLDG ADDRESS 719 Spanish Trail Dr SQ. FT. OF PROPOSED BLDGS/ADDITION 1611

TAX SCHEDULE NO. 2701-333-06-012 SQ. FT. OF EXISTING BLDGS _____

SUBDIVISION Spanish Trail TOTAL SQ. FT. OF EXISTING & PROPOSED 1611

FILING 2 BLK 7 LOT 12 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER Ray & Cynthia Shultz NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS 411 1/2 Prospectors Pt. USE OF EXISTING BUILDINGS _____

(1) TELEPHONE 970-257-0771 DESCRIPTION OF WORK & INTENDED USE new house

(2) APPLICANT Shultz Custom Homes TYPE OF HOME PROPOSED:
 Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 _____ Other (please specify) _____

(2) ADDRESS 411 1/2 Prospectors Pt.

(2) TELEPHONE 260-8080

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 PO Maximum coverage of lot by structures 60%

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 20' from PL Parking Req'mt 2

Maximum Height 32' Special Conditions Approval Ltr from Lic Eng.

CENSUS 9 TRAFFIC 5 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 3-19-03

Department Approval NA Gayle Henderson Date 3-20-03

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO	W/O No. <u>15851</u>
Utility Accounting	<u>[Signature]</u>	Date	<u>3-20-03</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)

719 Spanish Trail Dr.
Lot 12 Block 7 Filing 2

BLUE ARROWS ARE DRAINAGE

3-20-03

Gayle 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.

96'

74'

