

FEE \$	10.00
TCP \$	9
SIF \$	0

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

BLDG PERMIT NO. \_\_\_\_\_



Your Bridge to a Better Community

70608-39990

BLDG ADDRESS 2064 Stagecoach SQ. FT. OF PROPOSED BLDGS/ADDITION 1509

TAX SCHEDULE NO. 2947-151-40-015 SQ. FT. OF EXISTING BLDGS 2455

SUBDIVISION Independence Ranch TOTAL SQ. FT. OF EXISTING & PROPOSED 4055

FILING \_\_\_\_\_ BLK 2 LOT 15

NO. OF DWELLING UNITS:  
 Before: 1 After: 1 this Construction

NO. OF BUILDINGS ON PARCEL:  
 Before: 1 After: 1 this Construction

(1) OWNER Gilbert Maynard

(1) ADDRESS 2064 Stagecoach ct.

(1) TELEPHONE 970-246-3828

USE OF EXISTING BUILDINGS Residential

(2) APPLICANT SAME

DESCRIPTION OF WORK & INTENDED USE Basement Finish - 2 beds - 1 media - 1 famg 1 Full BATH 1 wet BAR

(2) ADDRESS \_\_\_\_\_

TYPE OF HOME PROPOSED:  
 Site Built  Manufactured Home (UBC)  
 Manufactured Home (HUD)  
 Other (please specify) - EOU

(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 FD Maximum coverage of lot by structures \_\_\_\_\_

SETBACKS: Front \_\_\_\_\_ from property line (PL)  
 or \_\_\_\_\_ from center of ROW, whichever is greater

Side \_\_\_\_\_ from PL, Rear \_\_\_\_\_ from PL

Permanent Foundation Required: YES \_\_\_\_\_ NO X

Parking Req'mt 2

Special Conditions \_\_\_\_\_

Maximum Height \_\_\_\_\_

CENSUS \_\_\_\_\_ TRAFFIC \_\_\_\_\_ ANNEX# \_\_\_\_\_

Wet bar will only have sink & small fridge  
No kitchen allowed.

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 12/1/03

Department Approval C Faye Hall Date 12/1/03

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No.
Utility Accounting	<u>[Signature]</u>	Date	<u>12-1-03</u> <u>interior remodel only</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)