## FEE\$ 10.00 TCP\$500.00

## **PLANNING CLEARANCE**

ructures)

BLDG PERMIT NO. 9/395

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

2011-161340-42799-30-F11400

Your Bridge to a Better Community

BLDG ADDRESS BSO Summer Sige CT	SQ. FT. OF PROPOSED BLDGS/ADDITION 2500 #
TAX SCHEDULE NO. <u>2701-264-40-008</u>	SQ. FT. OF EXISTING BLDGS
SUBDIVISION <u>Summer hill</u>	TOTAL SQ. FT. OF EXISTING & PROPOSED 2506 4
FILING 4 BLK / LOT 17  (1) OWNER 6D Construction  (1) ADDRESS P.O Box 1925  (1) TELEPHONE 243-647/  (2) APPLICANT SAME	NO. OF DWELLING UNITS:  Before: After: this Construction  NO. OF BUILDINGS ON PARCEL  Before: After: this Construction  USE OF EXISTING BUILDINGS From Home  DESCRIPTION OF WORK & INTENDED USE Town Home  TYPE OF HOME PROPOSED:
(2) ADDRESS	Site Built Manufactured Home (UBC) Manufactured Home (HUD) Other (please specify)
REQUIRED: One plot plan, on 8 ½" 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 CO	OMMUNITY DEVELOPMENT DEPARTMENT STAFF 🖘
ZONE YD	Maximum coverage of lot by structures
SETBACKS: Front from property line (PL) or from center of ROW, whichever is greater  Side from PL, Rear / 5	Parking Req'mt
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	Date 9-22-2003
Department Approval 76. Paylen Henlews	Date 9-24-03
Additional water and/or sewer tap fee(s) are required:	YES NO W/O No. //3-93
Utility Accounting	Date Glay/03
VALID FOR CIV MONTHS EDOM DATE OF ISSUANCE	(Section 9-3-2C Grand Junction Zoning & Development Code)

(White: Planning)

(Yellow: Customer)

(Pink: Building Department)

(Goldenrod: Utility Accounting)

