

FEE \$ 10.00
 TCP \$ 500.00
 SIF \$ 292.00

2011-61340-42799-30 F16400
PLANNING CLEARANCE
 (Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. _____



Your Bridge to a Better Community

BLDG ADDRESS 856 Summer Sky CT SQ. FT. OF PROPOSED BLDGS/ADDITION 2400 #
 TAX SCHEDULE NO. 2701-264-40-011 SQ. FT. OF EXISTING BLDGS —
 SUBDIVISION Summer Hill TOTAL SQ. FT. OF EXISTING & PROPOSED 2400 #
 FILING 4 BLK 1 LOT 10 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction
 (1) OWNER LGD Construction NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction
 (1) ADDRESS P.O. Box 1925 USE OF EXISTING BUILDINGS —
 (1) TELEPHONE 243-6471 DESCRIPTION OF WORK & INTENDED USE SF/TownHome
 (2) APPLICANT SAME TYPE OF HOME PROPOSED:
 (2) ADDRESS _____ Site Built _____ Manufactured Home (UBC)
 (2) TELEPHONE _____ _____ Manufactured Home (HUD)
 _____ Other (please specify) _____

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 PD Maximum coverage of lot by structures 50%
 SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES X NO _____
 or _____ from center of ROW, whichever is greater
 Side 7' from PL, Rear 15' from PL Parking Req'mt 2
 Maximum Height 32' Special Conditions Engineered foundation
 CENSUS B TRAFFIC Required 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).

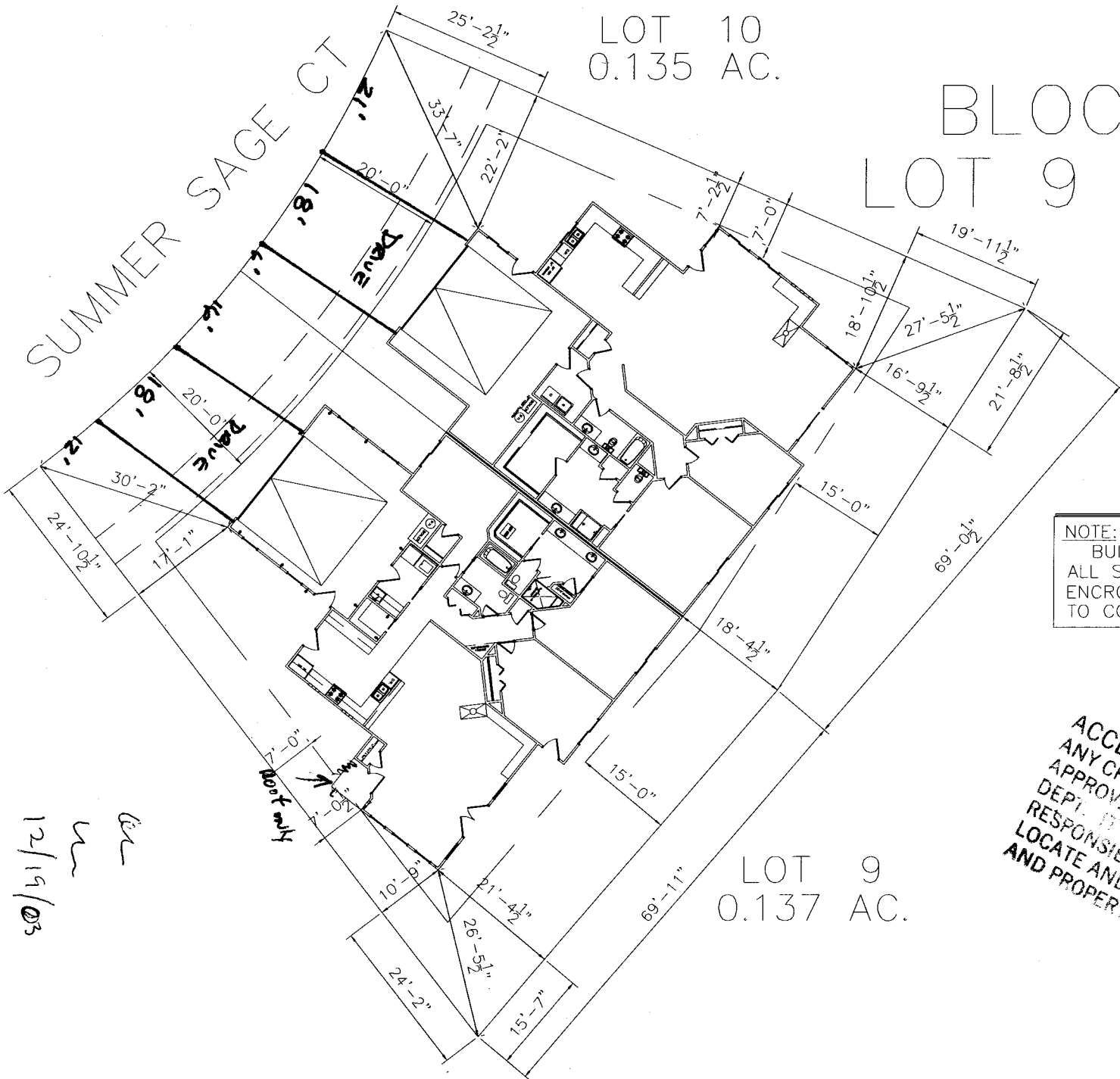
Applicant Signature [Signature] Date 12-19-2003
 Department Approval [Signature] Date 12/23/03

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO	W/O No. <u>16847</u>
Utility Accounting	<u>[Signature]</u>	Date	<u>12/23/03</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)

LOT 10
0.135 AC.

BLOCK 1
LOT 9 & 10



NOTE:
 BUILDER TO VERIFY
 ALL SETBACK AND EASEMENT
 ENCROACHMENTS PRIOR
 TO CONSTRUCTION

ACCEPTED *cy 12/23/03*
 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

LOT 9
0.137 AC.

12/19/03
w
ll

foot print