TCP \$ Ø (Single Family Residential a   SIF \$ Ø Community Develop		
ldg address <u>617 Teller Avenue</u>	SQ. FT. OF PROPOSED BLDGS/ADDITION	
AX SCHEDULE NO. <u>2945-142-18-003</u>	SQ. FT. OF EXISTING BLDGS	
	TOTAL SQ. FT. OF EXISTING & PROPOSED	
ILINGBLKLOT OWNER <u>Greg Humphrey</u> ) ADDRESS <u>617 Teller Ave</u> TELEPHONE APPLICANT <u>Integrity Contracting</u> ADDRESS <u>FO BOX 698 Fruita, CO 8152</u> TELEPHONE <u>970-255 1324</u>	NO. OF DWELLING UNITS; Before: After: this Construction NO. OF BUILDINGS ON PARCEL Before: After: this Construction USE OF EXISTING BUILDINGS <u>JUST ALL</u> DESCRIPTION OF WORK & INTENDED USE <u>ALL ALL</u> DESCRIPTION OF WORK & INTENDED USE <u>ALL ALL</u> TYPE OF HOME PROPOSED: <u>Concrete</u> <u>Fetaining</u> <u>Wall</u> Site Built Manufactured Home (UBC) Manufactured Home (HUD) Other (please specify)	
	all existing & proposed structure location(s), parking, setbacks to all cation & width & all easements & rights-of-way which abut the parcel.	
THIS SECTION TO BE COMPLETED BY CONE $\underline{RMF} - \overline{7}$	OMMUNITY DEVELOPMENT DEPARTMENT STAFF TARE MAXIMUM coverage of lot by structures	
TBACKS: Front 20' from property line (PL)	Permanent Foundation Required: YESNO	
from center of ROW, whichever is greater le $5^{\prime}$ from PL, Rear <u>10</u> from P	Parking Req'mt	
	Special Conditions	
aximum Height <u>35'</u>		

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 SUSA Gienapp	Date <u>4-11-03</u>
Department Approval C. Leure Liber	Date <u>4/11/03</u>
Additional water and/or sewer tap fee(s) are required: YE	S NO WONO.
Utility Accounting / Vanauer	Date 4-11-03
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Se	ction 9-3-2C Grand Junction Zoning & Development Code)

FROM DATE OF ISSUANCE (Section 9-3-20 Grand Junction Zoning & Development Code)

(White: Planning)	(Yellow: Customer)	(Pink: Building Department)

(Goldenrod: Utility Accounting)