

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

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

BLDG PERMIT NO. _____



Your Bridge to a Better Community

8237-3852

BLDG ADDRESS 1215 N 1st St. SQ. FT. OF PROPOSED BLDGS/ADDITION _____

TAX SCHEDULE NO. 2945-104-00-053 SQ. FT. OF EXISTING BLDGS 1350

SUBDIVISION _____ TOTAL SQ. FT. OF EXISTING & PROPOSED _____

FILING _____ BLK _____ LOT _____ NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction

(1) OWNER Lotti Beaton NO. OF BUILDINGS ON PARCEL
 Before: 2 After: 2 this Construction

(1) ADDRESS Box 158 Gateway Co. USE OF EXISTING BUILDINGS RESIDENCE

(1) TELEPHONE 970 931 2443 DESCRIPTION OF WORK & INTENDED USE DEMO & REBUILD Sunroom

(2) APPLICANT Lotti Beaton TYPE OF HOME PROPOSED:
 _____ Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 _____ Other (please specify) _____

(2) ADDRESS same

(2) TELEPHONE same

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 BMF-24 Maximum coverage of lot by structures 80%

SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES X NO _____
 or _____ from center of ROW, whichever is greater

Side 5' from PL, Rear 10' from PL Parking Req'mt 2

Maximum Height 40' Special Conditions _____

CENSUS _____ TRAFFIC _____ 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 3/5/04

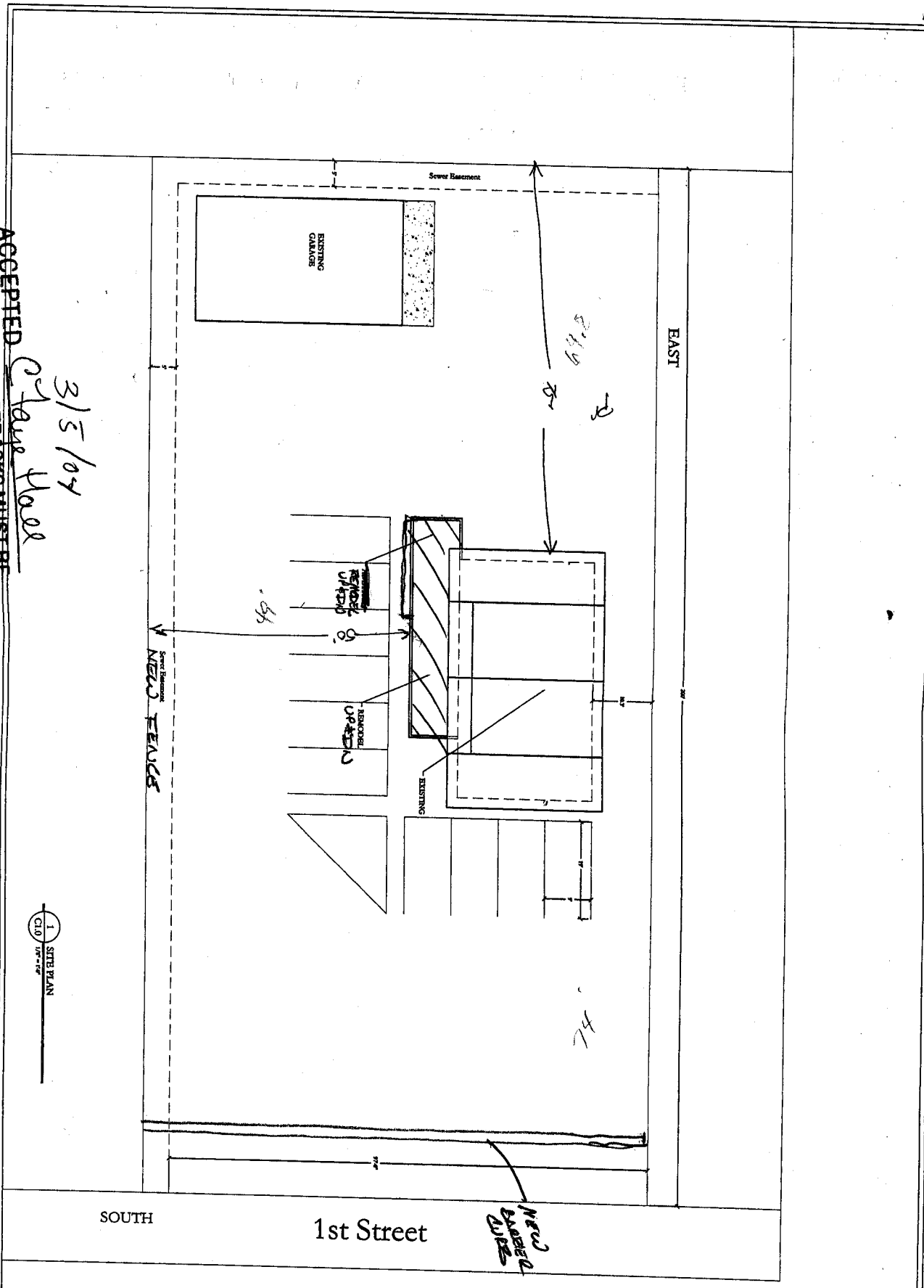
Department Approval [Signature] Date 3/5/04

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No.
Utility Accounting	<u>[Signature]</u>		Date <u>3/5/04</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)

ACCEPTED
 3/5/04
 C. J. WIDOWS
 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.



1 SITE PLAN
 C1.0
 1/8" = 1'-0"

Gateway Construction & Design Office
 1st Street
 Grand Junction, CO 8503

GATEWAY CONSTRUCTION & DESIGN
 P.O. Box 369, 43200 Hwy 141, Olathe, CO 81522
 Call (970) 931-2433 Fax (970) 931-2447
 gcohd@gwvy.com www.gatewaydev.com

Project #	Project #
Phase	Phase
Site	Site
Site Name	Site Name
Previous Date	Previous Date
Date	Date

Drawn By: J. WIDOWS
 C1.0
 Site Plan