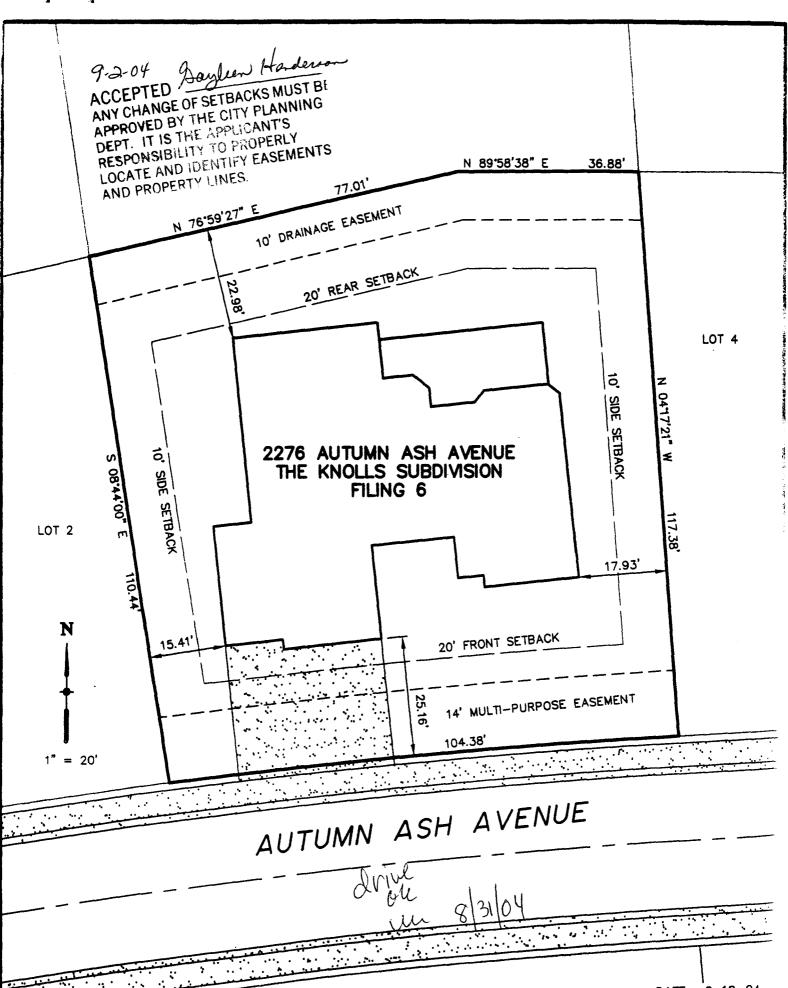
FEE \$	10.00
TCP\$	1,500.00
	1000 10

## **PLANNING CLEARANCE**

RI DG	<b>PERMIT</b>	NO
	i I I ZIAII I	140.

(Single Family Residential and Accessory Structures)

101 4 1	
SIF \$ 292.00 Community Developmen	nt Department
Building Address 2276 Anthin ASH	No. of Existing BldgsO Proposed
Parcel No. 2945 - 014 - 57 - 003	2500
Subdivision THE KNOLLS	Sq. Ft. of Existing Blags Proposed Proposed
	Sq. Ft. of Lot / Parcel 12,630 D
Filing 6 Block 3 Lot 3	Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed)
OWNER INFORMATION:	
Name MOYLIMENT HOMES	DESCRIPTION OF WORK & INTENDED USE:
Address 603284 Rd.	✓ New Single Family Home (*check type below)  Interior Remodel Addition  Other (please specify):
City/State/Zip GROND JUNCAON, CD	
APPLICANT INFORMATION: 81506	*TYPE OF HOME PROPOSED:
Name MONUMENT HomeS	✓ Site Built Manufactured Home (UBC)  Manufactured Home (HUD)  Other (please specify):
Address 603 28 4 Rd.	
City/State/Zip GRAND JUNCTION, CO	NOTES:
Telephone234~7700	
	isting & proposed structure location(s), parking, setbacks to all a width & all easements & rights-of-way which abut the parcel.
FIT THIS SECTION TO BE COMPLETED BY COMM	IUNITY DEVELOPMENT DEPARTMENT STAFF
zone <u> </u>	Maximum coverage of lot by structures35 %
SETBACKS: Front from property line (PL)	Permanent Foundation Required: YES_XNO
Side <i>10 '</i> from PLRear <i>20 '</i> from PL	Parking Requirement
Maximum Height of Structure(s)	Special Conditions
Driveway 1	
Voting District Location Approval (Engineer's Initials)	
	in writing, by the Community Development Department. The ntil a final inspection has been completed and a Certificate of partment (Section 305, Uniform Building Code).
ordinances, laws, regulations or restrictions which apply to the action, which may include by no necessarily be limited to nor	information is correct; I agree to comply with any and all codes, project. I understand that failure to comply shall result in legal n-use of the building(s).  Date 9-3-04
m h : A- 1 1 1 1 1	
Department Approval NA Paylien Henderson	Date 9-2-04
Additional water and/or sewer tap fee(s) are required: YES	
Utility Accounting \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Date $\mathcal{I}$



DATE: 8-18-04 JOB NO. 4030.00-70