

FEE \$	10.00
TCP \$	—
SIF \$	—

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

BLDG PERMIT NO. _____

Building Address 2714 CARIBBEAN DR. No. of Existing Bldgs 1 No. Proposed 2
 Parcel No. 2701-253-05-008 Sq. Ft. of Existing Bldgs 1700 Sq. Ft. Proposed +120
 Subdivision PARADISE HILLS Sq. Ft. of Lot / Parcel 14000 ±
 Filing 4A Block _____ Lot 8 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____
 Height of Proposed Structure 10'

OWNER INFORMATION:

Name Kelsey Hoque
 Address 2714 CARIBBEAN DR.
 City / State / Zip C.I. 81506

DESCRIPTION OF WORK & INTENDED USE:
 New Single Family Home (*check type below)
 Interior Remodel Addition
 Other (please specify): Shed-Storage

APPLICANT INFORMATION:

Name SAME
 Address _____
 City / State / Zip _____
 Telephone _____

***TYPE OF HOME PROPOSED:**
 Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): _____

NOTES: _____

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 RSF-4 Maximum coverage of lot by structures _____
 SETBACKS: Front 25 from property line (PL) Permanent Foundation Required: YES _____ NO X
 Side 3 from PL Rear _____ from PL Parking Requirement _____
 Maximum Height of Structure(s) _____ Special Conditions _____
 Voting District _____ Driveway Location Approval _____
 (Engineer's Initials)

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 Kelsey Co. Hoque Date 12/20/2004
 Department Approval Nancy Z. Caldwell Date 12/20/04

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>No change in USE</u>
Utility Accounting	<u>Marshall</u>		Date <u>12/20/04</u>

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning & Development Code)
 (White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)



ACCEPTED *SEA 12/20/04*
ANY CHANGES OR SETBACKS MUST BE
APPROVED BY THE CITY PLANNING
DEPT. IT IS THE APPLICANTS
RESPONSIBILITY TO PROPERLY
LOCATE AND IDENTIFY EASEMENTS
AND PROPERTY LINES.