FEE \$ 10.00 PLANNING CI	LEARANCE BLDG PERMIT NO.
TCP \$ (Single Family Residential and	
SIF \$ Community Develop	oment Department
83452-45(71, @	Your Bridge to a Better Community
BLDG ADDRESS 733 Centauri Ct	-SQ. FT. OF PROPOSED BLDGS/ADDITION 16 x32 Pool
TAX SCHEDULE NO. 2701-354-66-011	SQ. FT. OF EXISTING BLDGS
SUBDIVISION Windemere Heights	TOTAL SQ. FT. OF EXISTING & PROPOSED
FILING <u>N/A</u> BLK <u>3</u> LOT <u>//</u>	NO. OF DWELLING UNITS:
"OWNER Dicky + Dag Thurlow	Before: After: this Construction NO. OF BUILDINGS ON PARCEL
(1) ADDRESS 733 Centauri Ct	Before: After: this Construction
⁽¹⁾ TELEPHONE <u>261 - 0089</u>	USE OF EXISTING BUILDINGS Home
(2) APPLICANT Quel. 4 Pools	DESCRIPTION OF WORK & INTENDED USE - Pool
	TYPE OF HOME PROPOSED: Ingrand
⁽²⁾ ADDRESS <u>()</u> (). <u>157</u> .	Site Built Manufactured Home (UBC) Manufactured Home (HUD)
⁽²⁾ TELEPHONE <u>24/-84/2</u>	Other (please specify)
	all existing & proposed structure location(s), parking, setbacks to all cation & width & all easements & rights-of-way which abut the parcel.
$\nabla < C \cap$	OMMUNITY DEVELOPMENT DEPARTMENT STAFF 🖘
ZONE DJ - Z	Maximum coverage of lot by structures
SETBACKS: Front <u>C</u> from property line (PL) or from center of ROW, whichever is greater	Permanent Foundation Required: YES NO
	Parking Req'mt
	L Special Conditions
Maximum Height	CENSUS TRAFFIC ANNX#
Modifications to this Planning Clearance must be approv	ved, in writing, by the Community Development Department. The

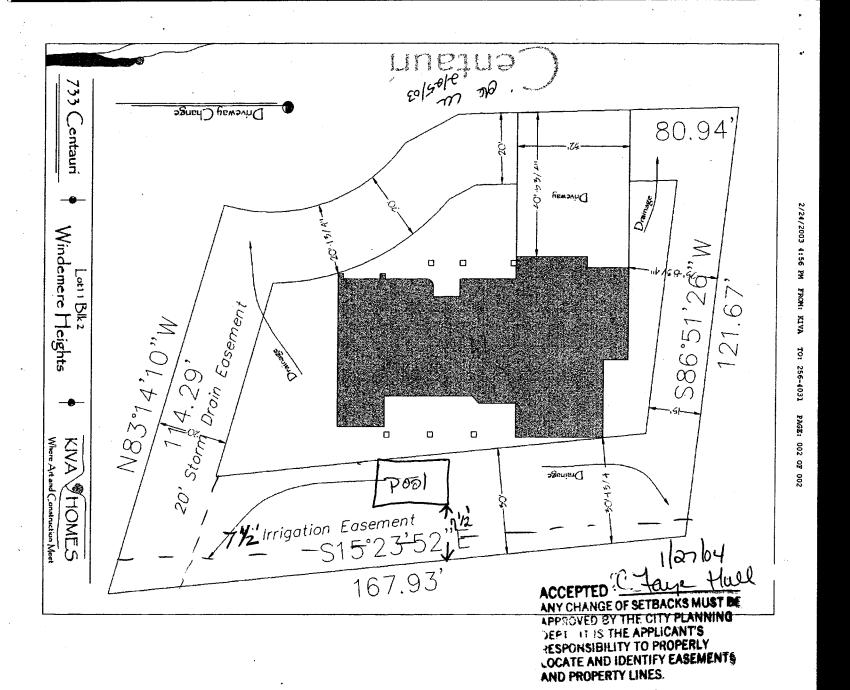
structure authorized by this application cannot be occupied until a final inspection has been completed and a Certificate of Occupancy has been issued, if applicable, by the Building Department (Section 305, Uniform Building Code).

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	Date	1-27-04
Department Approval (Aays Hall	Date	1/27/04
Additional water and/or sewer tap fee(s) are required: YES	NO	WIGNO
Utility Accounting fotte Gover	Date	(-27-04
VALID EOD SIX MONTHE EDOM DATE OF ISSUANCE (Section 0.2.20)	Grand Juncti	ion Zoning & Dovolonment Code)

OR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

(White:	Planning)	
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