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|--------|-------|
| 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

on septic

BLDG ADDRESS 2593 FRUITRIDGE DRIVE SQ. FT. OF PROPOSED BLDGS/ADDITION N/A

TAX SCHEDULE NO. 2945-034-05-004 SQ. FT. OF EXISTING BLDGS 4000 SF

SUBDIVISION 2ND FRUITRIDGE SUBDIVISION TOTAL SQ. FT. OF EXISTING & PROPOSED SAME

FILING _____ BLK _____ LOT 4 NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction

(1) OWNER Jim Herken NO. OF BUILDINGS ON PARCEL
 Before: 1 After: 1 this Construction

(1) ADDRESS 2593 FruitRidge Dr. USE OF EXISTING BUILDINGS SINGLE FAMILY

(1) TELEPHONE 970-263-0890 DESCRIPTION OF WORK & INTENDED USE INTERIOR REMODELING

(2) APPLICANT J. Dyer Construction TYPE OF HOME PROPOSED: windows, floors, cabinets
 _____ Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 Other (please specify) INTERIOR REMODEL

(2) ADDRESS ~~2593~~ 2323 Interstate

(2) TELEPHONE 970-257-7599

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-1 Maximum coverage of lot by structures _____

SETBACKS: Front 10' from property line (PL) Permanent Foundation Required: YES _____ NO _____
 or _____ from center of ROW, whichever is greater

Side 10' from PL, Rear 10' from PL Parking Req'mt N/A

Maximum Height _____ Special Conditions no additional kitchen

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).

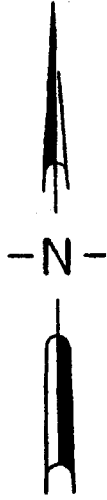
Applicant Signature [Signature] Date 2/5/04

Department Approval [Signature] Date 2-5-04

| | | | |
|--|--------------------|--|------------------------------|
| Additional water and/or sewer tap fee(s) are required: | YES | NO <input checked="" type="checkbox"/> | W/O No. <u>No dry in use</u> |
| Utility Accounting | <u>[Signature]</u> | Date | <u>2/5/04</u> |

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1.c(1) Grand Junction Zoning & Development Code)

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)



SCALE 1" = 100'

2-5-04

ACCEPTED *Gayle Henderson*

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.

