

FEE \$ <u>10.00</u>
TCP \$ <u>500.00</u>
SIF \$ <u>292.00</u>

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

BLDG PERMIT NO. _____



Your Bridge to a Better Community

2011-61340-42799-30-F16400

BLDG ADDRESS 853 Haven Crest Ct. S. SQ. FT. OF PROPOSED BLDGS/ADDITION 3500

TAX SCHEDULE NO. 2701-261-39-002 SQ. FT. OF EXISTING BLDGS - 0 -

SUBDIVISION Summerhill TOTAL SQ. FT. OF EXISTING & PROPOSED 3500

FILING 3 BLK 2 LOT 2 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER TOFT CONSTRUCTION INC NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS 2692 Haven Hill Dr USE OF EXISTING BUILDINGS SFR

(1) TELEPHONE 843-1351 DESCRIPTION OF WORK & INTENDED USE Build SFR

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

(2) ADDRESS _____

(2) TELEPHONE 214-0676

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 PD Maximum coverage of lot by structures 30%

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

Side 10' from PL, Rear 30' from PL Parking Req'mt 2

Maximum Height 32' Special Conditions Eng. foundations req'd

CENSUS B 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 3/4/04

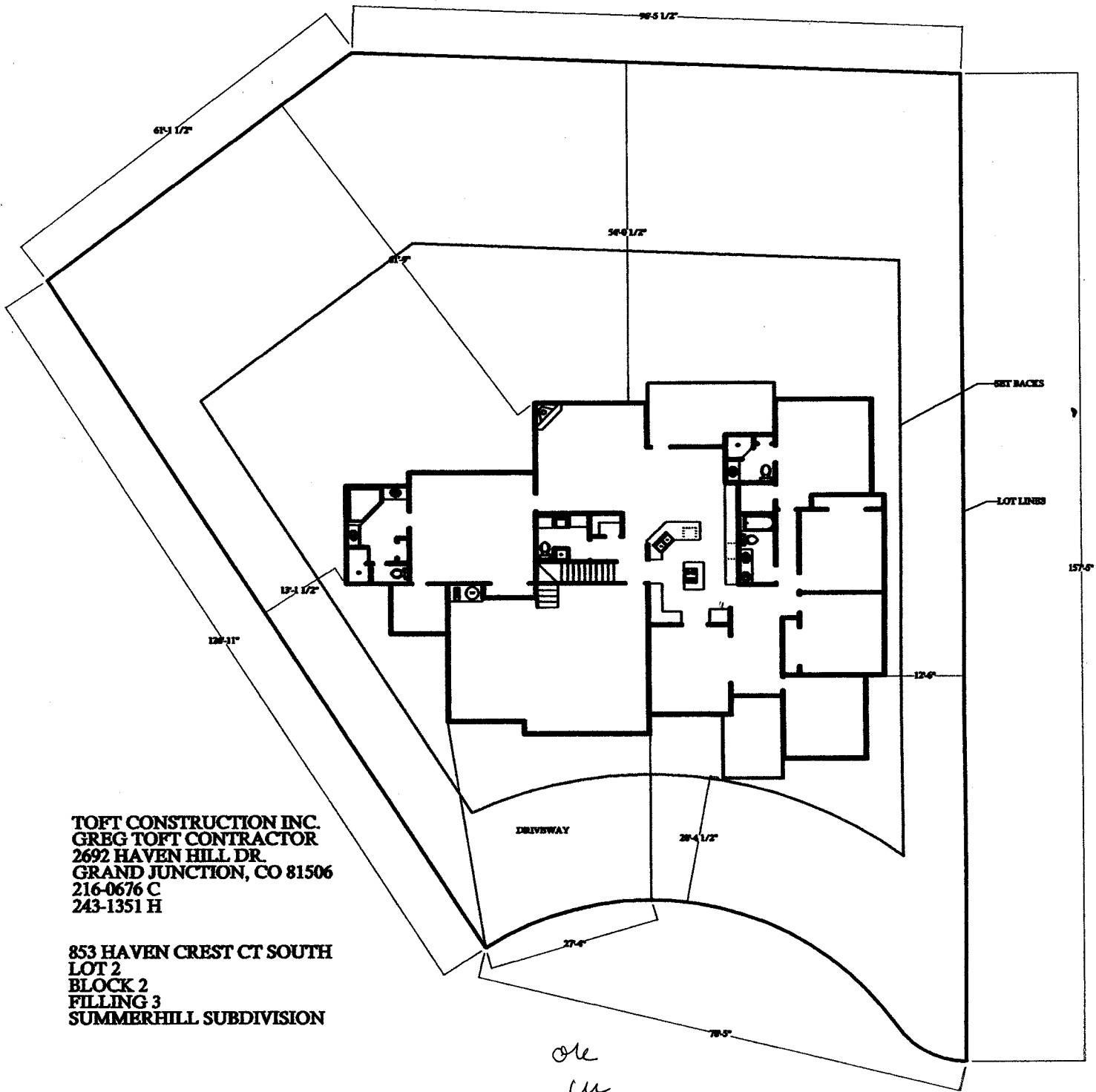
Department Approval [Signature] Date 3/8/04

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>17053</u>
Utility Accounting	Date <u>3/8/04</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 *Ashe Ragan* 3-8-04
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.



TOFT CONSTRUCTION INC.
GREG TOFT CONTRACTOR
2692 HAVEN HILL DR.
GRAND JUNCTION, CO 81506
216-0676 C
243-1351 H

853 HAVEN CREST CT SOUTH
LOT 2
BLOCK 2
FILLING 3
SUMMERHILL SUBDIVISION

ole
cu
3/4/04