

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

BLDG ADDRESS 2515 Hayrs Dr SQ. FT. OF PROPOSED BLDGS/ADDITION 2451 #

TAX SCHEDULE NO. 2445-032-92-004 SQ. FT. OF EXISTING BLDGS _____

SUBDIVISION Colonial Heights TOTAL SQ. FT. OF EXISTING & PROPOSED 2451 #

FILING 2 BLK 3 LOT 7 NO. OF DWELLING UNITS:
 Before: _____ After: 1 this Construction

(1) OWNER Sonshine II NO. OF BUILDINGS ON PARCEL
 Before: _____ After: 1 this Construction

(1) ADDRESS 2350 G ROAD USE OF EXISTING BUILDINGS B

(1) TELEPHONE 255-8853 DESCRIPTION OF WORK & INTENDED USE Single Family

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

(2) ADDRESS 2350 G ROAD

(2) TELEPHONE 255-8853

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 RMF-5 Maximum coverage of lot by structures 60%

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

Side 5' from PL, Rear 25' from PL Parking Req'mt 2

Maximum Height 35' Special Conditions Letter from Engineer Required

B 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 3/29/04

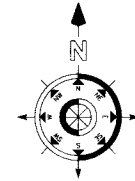
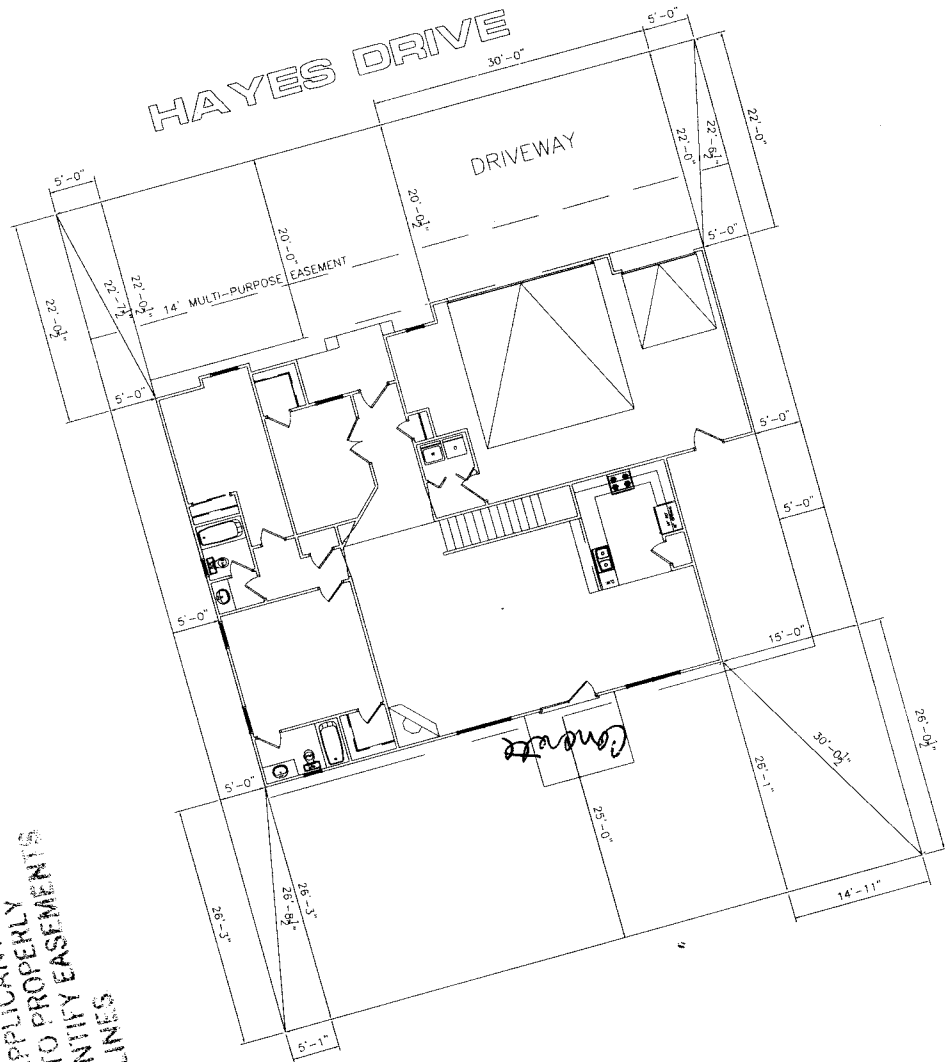
Department Approval [Signature] Date 6/13/04

Additional water and/or sewer tap fee(s) are required: YES <u>X</u> NO _____	W/O No. <u>17297</u>
Utility Accounting <u>[Signature]</u>	Date <u>6/2/04</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)

HAYES DRIVE



NOTE:
BUILDER TO VERIFY
ALL SETBACK AND EASEMENT
ENCROACHMENTS PRIOR
TO CONSTRUCTION

com
W
3/30/04

SITE PLAN INFORMATION	
SUBDIVISION NAME	COLONIAL HEIGHTS - FILING 2
LOT NUMBER	7
BLOCK NUMBER	3
STREET ADDRESS	?
COUNTY	MESA
HOUSE LIVING SQ. FT.	2005 SF
LOT SIZE	6544 SF
SETBACKS USED	FRONT 20'
	SIDES 5'
	REAR 25'

NOTE:
DIMENSION LINES ARE PULLED FROM
EDGE OF BRICK LEDGE. IF NO BRICK LEDGE
EXISTS, DIMENSIONS WILL BE FROM EDGE
OF FOUNDATION.

6/3/04
Claw Hall
ACCEPTED
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

SCALE: 1/8" = 1'-0"

2515 Hayes Dr
Homestead #5

Alanna

SONALINE II

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1/8