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# PLANNING CLEARANCE

BLDG PERMIT NO.
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(Single Family Residential and Accessory Structures)  
**Community Development Department**

*Remodeling Cost*

Building Address 501 MAIN, G.J.  
 Parcel No. 2945 1#3 20 001  
 Subdivision \_\_\_\_\_  
 Filing \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

No. of Existing Bldgs 1 No. Proposed 1  
 Sq. Ft. of Existing Bldgs \_\_\_\_\_ Sq. Ft. Proposed \_\_\_\_\_  
 Sq. Ft. of Lot / Parcel Remodeling Cost = 6,000  
 VALUE = 240,510.00  
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) \_\_\_\_\_

**OWNER INFORMATION:**

Name SARNA FOSTER & C A NEWTON FAM. TRUST  
 Address 8 12<sup>TH</sup> CT.  
 City / State / Zip GRAND JCT, CO 81506-5450

**DESCRIPTION OF WORK & INTENDED USE:**

New Single Family Home (\*check type below)  
 Interior Remodel  Addition  
 Other (please specify): \_\_\_\_\_

**APPLICANT INFORMATION:**

Name BOA BUILDERS  
 Address BOX 603  
 City / State / Zip PALISADE, CO 81526  
 Telephone 464 7842

**\*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 <u>B-2</u>	Maximum coverage of lot by structures <u>N/A</u>
SETBACKS: Front _____ from property line (PL)	Permanent Foundation Required: YES _____ NO <u>X</u>
Side _____ from PL Rear _____ from PL	Parking Requirement <u>N/A</u>
Maximum Height of Structure(s) <u>N/A</u>	Special Conditions <u>Interior remodel only</u>
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 Thomas J. Bosko Date 5/4/2004  
 Department Approval Wishu Wagon Date 5/5/04

Additional water and/or sewer tap fee(s) are required:	YES	NO <u>X</u>	W/O No. _____
Utility Accounting <u>John Overholt</u>	Date <u>5/5/04</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)