

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

BLDG ADDRESS 317 MOUNTAIN VIEW ST. SQ. FT. OF PROPOSED BLDGS/ADDITION 10 X 12¹²⁰

TAX SCHEDULE NO. 2945-244-09-011 SQ. FT. OF EXISTING BLDGS 1000

SUBDIVISION _____ TOTAL SQ. FT. OF EXISTING & PROPOSED 120

FILING _____ BLK _____ LOT _____

NO. OF DWELLING UNITS:
 Before: 1 After: 1 this Construction

NO. OF BUILDINGS ON PARCEL
 Before: 1 After: 2 this Construction

(1) OWNER MARY P. TEZAK

(1) ADDRESS 317 Mt. View Dr.

(1) TELEPHONE 970-245-0215

USE OF EXISTING BUILDINGS None

(2) APPLICANT Same

DESCRIPTION OF WORK & INTENDED USE Shed

(2) ADDRESS _____

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

(2) TELEPHONE _____

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 _____

SETBACKS: Front 25' from property line (PL) Permanent Foundation Required: YES _____ NO X
 or _____ from center of ROW, whichever is greater

Side 3' from PL, Rear 5' from PL Parking Req'mt 2

Maximum Height _____ Special Conditions _____

CENSUS _____ TRAFFIC _____ ANN# _____

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 Mary P. Tezak Date April 12, 2004

Department Approval C. Hays Hall Date 4/12/04

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. _____
Utility Accounting	<u>Kattelsberry</u>	Date	<u>4/12/04</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)

