

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 2823 S. Niagara SQ. FT. OF PROPOSED BLDGS/ADDITION 96

TAX SCHEDULE NO. 2943-182-17-009 SQ. FT. OF EXISTING BLDGS _____

SUBDIVISION Niagara Village TOTAL SQ. FT. OF EXISTING & PROPOSED two 8'x12' sheds

FILING 1 BLK 2 LOT 9 NO. OF DWELLING UNITS:
Before: 1 After: 1 this Construction

(1) OWNER Dennis + Linda Forster NO. OF BUILDINGS ON PARCEL
Before: 1 After: 3 this Construction

(1) ADDRESS 2823 S. Niagara Cir.

(1) TELEPHONE 970-242-6550

(2) APPLICANT _____

(2) ADDRESS _____

(2) TELEPHONE _____

USE OF EXISTING BUILDINGS House

DESCRIPTION OF WORK & INTENDED USE hobby / storage

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

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 _____

SETBACKS: Front _____ from property line (PL)
or _____ from center of ROW, whichever is greater

Permanent Foundation Required: YES _____ NO _____

Side _____ from PL, Rear _____ from PL

Parking Req'mt _____

Maximum Height _____

Special Conditions per bldg envelop

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).

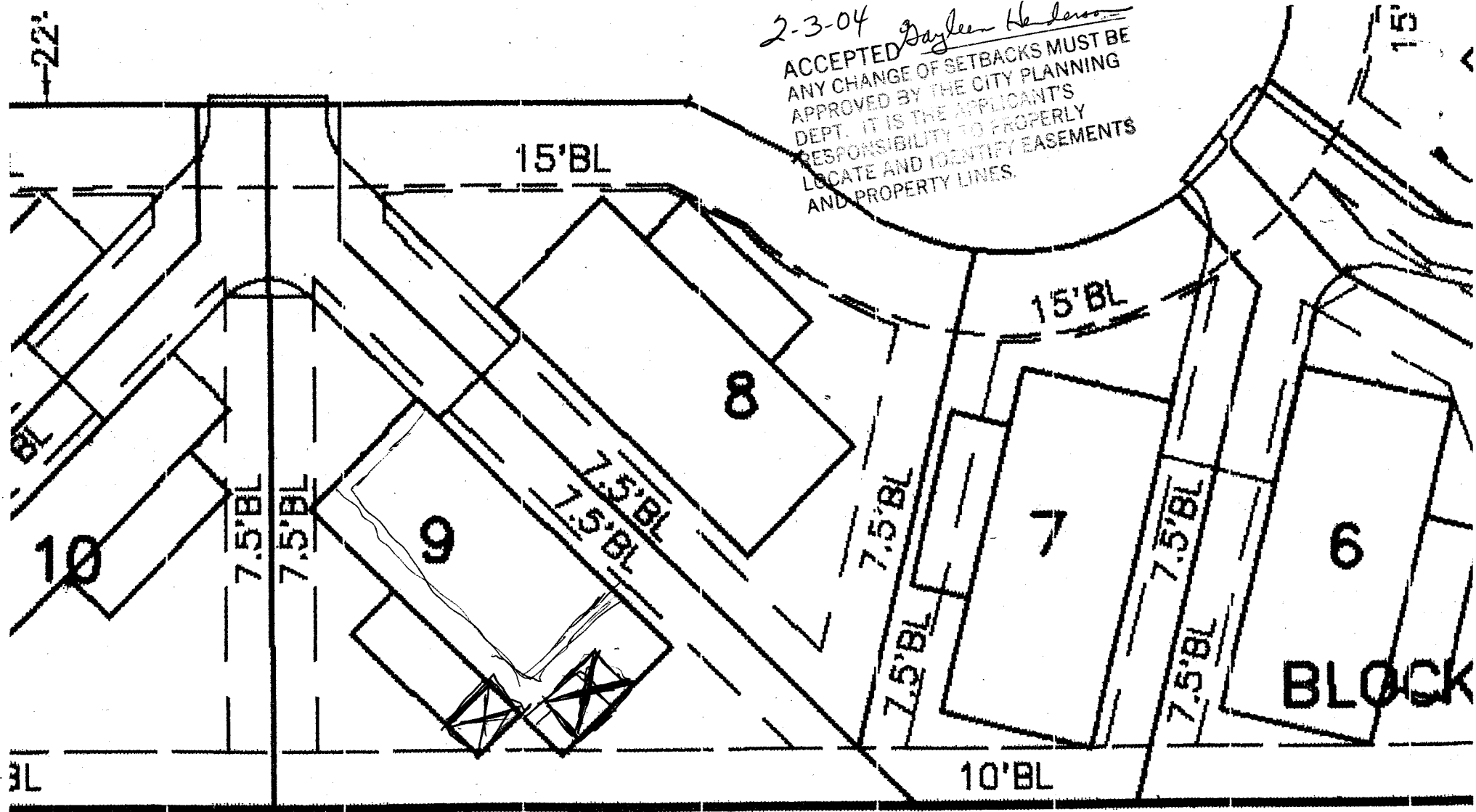
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily be limited to non-use of the building(s).

Applicant Signature [Signature] Date 2-3-04
Department Approval [Signature] Date 2-3-04

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>no charge</u>
Utility Accounting	<u>[Signature]</u>	Date	<u>2/20/04</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)



2-3-04 *Dayleen He Lasso*
 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.

D JUNCTION 33' R.O.W.
 4, PAGE 757
 17, PAGE 421

2823
 S. Niagra Cir

401.03'
NO LOT ACCESS