FEE'\$ /0:00	PLANNING CLEA	RANCE	BLDG PERMIT NO.	
TCP\$	(Single Family Residential and Accessory Structures)			
	Community Developme	nt Department		
SIF\$	omso	91		
Building Address <u>2833 PITCHRLEND CT</u> 2943 - 303 - (21 - 020		No. of Existing Bldgs	1550	No. Proposed
Parcel No. LOT 20 BLK 2 SEC 30 15 1E		Sq. Ft. of Existing Bld	gs 1450	Sq. Ft. Proposed <u>96</u>
Subdivision ARE	ROWHEAD ACRES II	Sq. Ft. of Lot / Parce	91 <u>1668</u>	<u> </u>
Filing Block <u>1</u> Lot <u>20</u>		Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed)		
OWNER INFORMATION:				
Name		DESCRIPTION OF WORK & INTENDED USE:		
Address		New Single Family Home (*check type below) Interior Remodel Addition		
City / State / Zip		Other (please specify):		
APPLICANT INFORMATION:		*TYPE OF HOME PROPOSED:		
		Site Built		Manufacture (UBC)
		Manufactured Ho Other (please spe		40 °
Address 2833 PITCHBLEND CT Shall				
City/State/Zip GRAND JUNICTION (D 81503 NOTES: Shed				
Telephone 970-245-734/				
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.				
	CTION TO BE COMPLETED BY COM			
ZONE RMF-5		Maximum coverage of lot by structures		
SETBACKS: Front 25' from property line (PL)		Permanent Foundation Required: YESNO_X		
Side		Parking Requirement		
Maximum Height of Structure(s)		Special Conditions		
Driveway				
Voting District	Location Approval(Engineer's Initials)		
structure authorized I	Planning Clearance must be approved, by this application cannot be occupied in issued, if applicable, by the Building De	until a final inspection	has been con	npleted and a Certificate of
ordinances, laws, reg	e that I have read this application and the julations or restrictions which apply to the clude but not necessarily be limited to no	e project. I understand	d that failure to	
Applicant Signature Air American Date 5-6-2004				
Department Approva	1 4/18hu Magar	Date	5/12	104

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)

YES

NO

Date

W/O No.

Additional water and/or sewer tap fee(s) are required:

Utility Accounting

