

FEE \$	10.00
TCP \$	0
SIF \$	0

PLANNING CLEARANCE (N)
 (Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. _____



Your Bridge to a Better Community

physical 2898 River St.
 mailing 2898 C 1/2 Rd

SQ. FT. OF PROPOSED BLDGS/ADDITION 340

TAX SCHEDULE NO. 2943-191-110-002

SQ. FT. OF EXISTING BLDGS 1200

SUBDIVISION Weaver Minor Sub

TOTAL SQ. FT. OF EXISTING & PROPOSED 1540

FILING _____ BLK _____ LOT 2

NO. OF DWELLING UNITS:

(1) OWNER GAIL A Johnson

Before: _____ After: _____ this Construction

(1) ADDRESS 2898 C 1/2 Rd

NO. OF BUILDINGS ON PARCEL

(1) TELEPHONE 242-6417

Before: _____ After: _____ this Construction

(2) APPLICANT _____

USE OF EXISTING BUILDINGS Residence

(2) ADDRESS _____

DESCRIPTION OF WORK & INTENDED USE STORAGE
enclose carport

(2) TELEPHONE _____

TYPE OF HOME PROPOSED:

____ Site Built _____ Manufactured Home (UBC)

____ Manufactured Home (HUD)

Other (please specify) pat sides ON CARPORT

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 RSF-2

Maximum coverage of lot by structures 30%

SETBACKS: Front 20' from property line (PL)
 or _____ from center of ROW, whichever is greater

Permanent Foundation Required: YES NO _____

Side 15' from PL, Rear 30' from PL

Parking Req'mt 2

Maximum Height 35'

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 Gail A Johnson

Date 9-7-04

Department Approval Baylen Henderson

Date 9-7-04

Additional water and/or sewer tap fees) are required:	YES	NO	W/O No. _____
Utility Accounting	<u>0</u>	Date	<u>9/7/04</u>

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

(White: Planning)

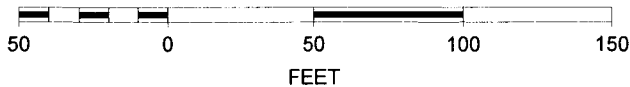
(Yellow: Customer)

(Pink: Building Department)

(Goldenrod: Utility Accounting)



SCALE 1 : 774



9-7-04
ACCEPTED *Gaylen Henderson*
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.

