

FEE \$	70.00
TCP \$	1500.00
SIF \$	292.00

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

BLDG PERMIT NO. _____



Your Bridge to a Better Community

BLDG ADDRESS 461-Shadow Rock CT. SQ. FT. OF PROPOSED BLDGS/ADDITION 3118

TAX SCHEDULE NO 2947-222-15-005 SQ. FT. OF EXISTING BLDGS NA

SUBDIVISION THE SEASONS TOTAL SQ. FT. OF EXISTING & PROPOSED 3118

FILING 10 BLK _____ LOT 5 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER Paul & Susan Dupadia NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS _____ USE OF EXISTING BUILDINGS NA

(1) TELEPHONE 256-9304 DESCRIPTION OF WORK & INTENDED USE NEW Single Family Res.

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

(2) ADDRESS 3032-E 1/2 Rd.

(2) TELEPHONE 434-5954, 234-9451

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

Side 20' from PL, Rear 10' from PL Parking Req'mt 2

Maximum Height 22' Special Conditions individual lot drainage & stormwater management

A

CENSUS _____ TRAFFIC _____ ANNEX# _____

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 Chul [Signature] Date _____

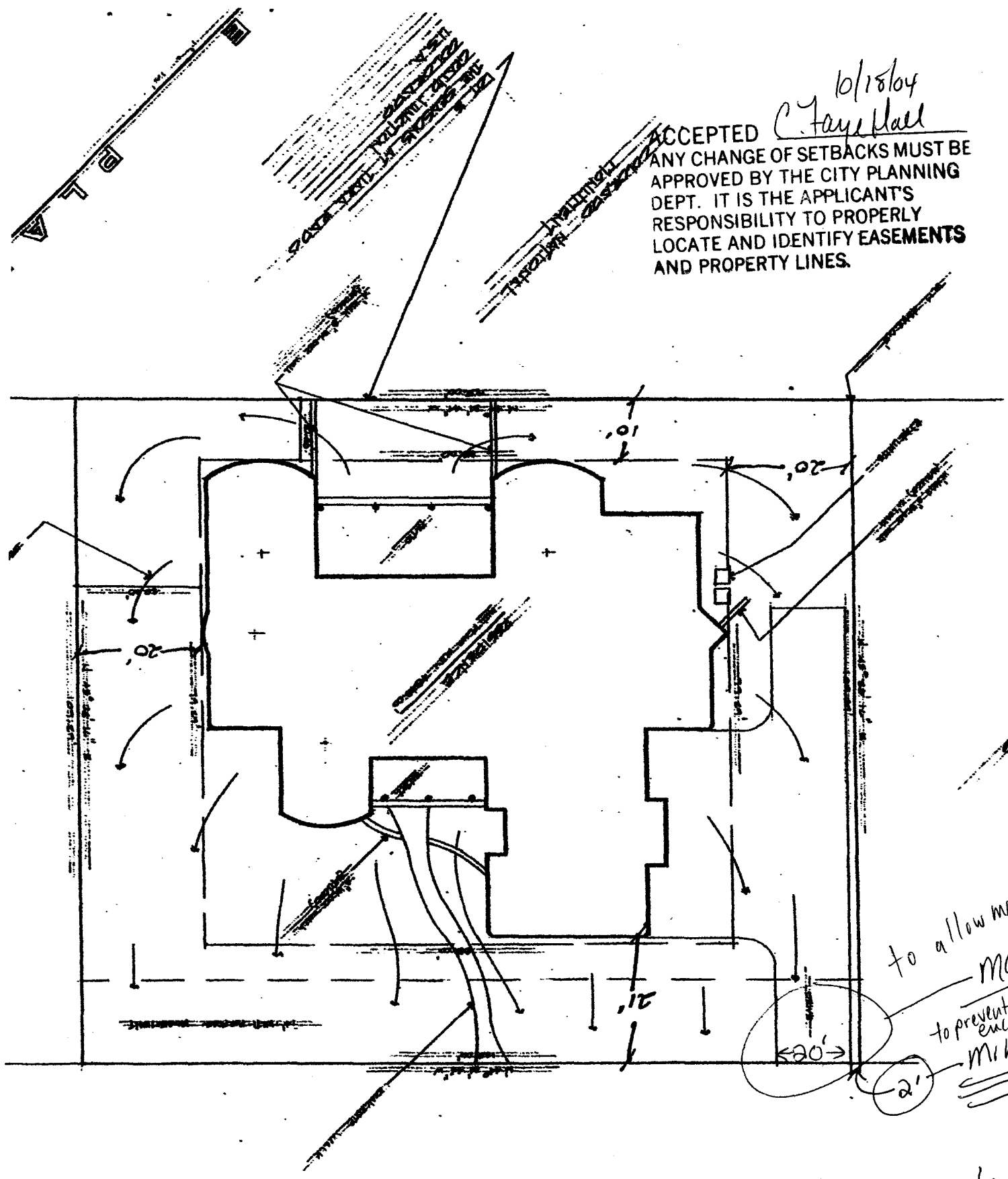
Department Approval [Signature] Date 10/18/04

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO	W/O No. <u>17670</u>
Utility Accounting <u>[Signature]</u>	Date	<u>10/18/04</u>	

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

10/18/04
C. Faye Hall

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.



to allow maneuvering
MAX
to prevent encroachment
MIN
2'

ok as noted
CCH
10/18/04

SHADOW BOX ZONE