

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

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

BLDG PERMIT NO. _____

97176-10404

Building Address 3643 N. BELL RIDGE CT
 Parcel No. 2945-012-48-015
 Subdivision PT ARMIGAN Ridge
 Filing 1 Block 1 Lot 15

No. of Existing Bldgs 1 No. of Proposed 1
 Sq. Ft. of Existing Bldgs 1986' Sq. Ft. Proposed 180
 Sq. Ft. of Lot / Parcel _____
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____
 Height of Proposed Structure _____

OWNER INFORMATION:

Name KENNEY S. MORRIS
 Address 3643 N. BELL RIDGE CT
 City / State / Zip G. J. CO 81506

DESCRIPTION OF WORK & INTENDED USE:

New Single Family Home (*check type below)
 Interior Remodel Addition
 Other (please specify): _____

APPLICANT INFORMATION:

Name SAME
 Address _____
 City / State / Zip _____
 Telephone 314-2474

***TYPE OF HOME PROPOSED:**

Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): shed

NOTES: _____

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 <u>RMF-5</u>	Maximum coverage of lot by structures _____
SETBACKS: Front <u>25'</u> from property line (PL)	Permanent Foundation Required: YES _____ NO <input checked="" type="checkbox"/>
Side <u>3'</u> from PL Rear <u>5'</u> from PL	Parking Requirement <u>2</u>
Maximum Height of Structure(s) _____	Special Conditions _____
Voting District _____	Driveway Location Approval _____ (Engineer's Initials)

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 Kennedy S. Morris Date 8-10-05
 Department Approval C. Gary Hall Date 8/10/05

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No.
Utility Accounting <u>X5</u>	Date <u>8/10/05</u>		

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)



Cyrene Hall Skolobas

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.

SCALE 1 : 388

