

FEE \$	10.00
TCP \$	1500. ⁰⁰
SIF \$	292. ⁰⁰

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. _____

Building Address 2935 F 1/4 ROAD
 Parcel No. 2943 053 -77-006
 Subdivision FOREST ESTATES
 Filing 1 Block 1 Lot 6

No. of Existing Bldgs 0 No. of Proposed 1
 Sq. Ft. of Existing Bldgs 0 Sq. Ft. Proposed 1926
 Sq. Ft. of Lot / Parcel 7004
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) 3400
 Height of Proposed Structure 20'

OWNER INFORMATION:

Name MAX SNEDDON
 Address 2452 HOME RANCH CT.
 City / State / Zip G J / CO / 81501

DESCRIPTION OF WORK & INTENDED USE:
 New Single Family Home (*check type below)
 Interior Remodel Addition
 Other (please specify): _____

APPLICANT INFORMATION:

Name SNEDDON CONST. INC.
 Address " "
 City / State / Zip " "
 Telephone 970-201-9098

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

NOTES: SINGLE-FAMILY RESIDENTIAL

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 <u>60%</u>		
SETBACKS: Front <u>20'</u> from property line (PL)	Permanent Foundation Required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
Side <u>5'</u> from PL Rear <u>25'</u> from PL	Parking Requirement <u>2</u>		
Maximum Height of Structure(s) <u>35'</u>	Special Conditions _____		
Voting District _____	Driveway Location Approval <u>CU</u> (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 [Signature] Date 10-31-05
 Department Approval NA [Signature] Date 11-7-05

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>186/4</u>
Utility Accounting <u>[Signature]</u>	Date <u>12/7/05</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)

2935 F 1/4 ROAD - LOT 6 - FORREST ESTATES SUBDIVISION

SITE/PLOT PLAN - DOUGLAS MODEL - SCALE (20)

ACCEPTED NAD *Kathy Valley*
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.

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