

FEE \$ ~~5,000~~ 5,000
 TCP \$ 0
 SIF \$ 0

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

BLDG PERMIT NO. _____

INTERIOR REMODEL

Building Address 3760 Horizon Glen Ct.
 Parcel No. 2945-021-13-033
 Subdivision Horizon Glen Club
 Filing _____ Block _____ Lot 13

No. of Existing Bldgs 1 No. Proposed 1
 Sq. Ft. of Existing Bldgs _____ Sq. Ft. Proposed 2576
 Sq. Ft. of Lot / Parcel _____
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) No Change
 Height of Proposed Structure No change

OWNER INFORMATION:

Name Bill Fitch
 Address 3760 Horizon Glen 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 Kennedy Quality Homes
 Address P.O. Box 261
 City / State / Zip Fruita, CO 81521
 Telephone 261-4343

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

NOTES: Basement finish
carpet
wallpaper, bedrooms, storage, closet
& bathroom

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>PO</u>	Maximum coverage of lot by structures _____
SETBACKS: Front _____ from property line (PL)	Permanent Foundation Required: YES _____ NO _____
Side _____ from PL Rear _____ from PL	Parking Requirement _____
Maximum Height of Structure(s) _____	Special Conditions <u>N/A</u>
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 [Signature] Date 11-17-05
 Department Approval [Signature] Date 11-22-05

Additional water and/or sewer tap fee(s) are required: YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/> W/O No. _____
Utility Accounting <u>[Signature]</u> Date <u>11/22/05</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)