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FEE \$ 10.00 PLANNING CLE	EARANCE BLDG PERMIT NO.
TCP \$ (Single Family Residential and Community Development	
SIF \$	nent Department
Building Address 322 Quail Da.	_ No. of Existing Bldgs/ No. Proposed/
Parcel No. 2947 - 354 - 312 - 802	Sq. Ft. of Existing Bldgs Sq. Ft. Proposed
Subdivision <u>Gerick</u>	Sq. Ft. of Lot / Parcel <u>3, 20 Acres</u>
Filing Block Lot	Sq. Ft. Coverage of Lot by Structures & Impervious Surface
OWNER INFORMATION:	(Total Existing & Proposed) Height of Proposed Structure20 '
Name Walt & Gwen Bardwine Address 322 Quail DR.	DESCRIPTION OF WORK & INTENDED USE: New Single Family Home (*check type below) Interior Remodel Other (please specify):
City / State / Zip	- Other (please specify).
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED:
Name DAVID PainTer	_ Site Built _ Manufactured Home (UBC) _ Manufactured Home (HUD)
Address 190 Roselie Da	Other (please specify):
City / State / Zip 6. 9. 6. 81 503	NOTES:
Telephone 245-5621 216-646	9
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	
zoneKSF-1	_ Maximum coverage of lot by structures
SETBACKS: Front from property line (PL)	Permanent Foundation Required: YES X NO
Side from PL Rear from PL	Parking Requirement
Maximum Height of Structure(s) 35	Special Conditions
Driveway Voting District Location Approval (Engineer's Initia	als)
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 timited to non-use of the building(s).	
Applicant Signature () pill at Date 6-8-05	
Department Approval 1/15/11 Magin Date 1/13/15	
	(ES NO W/ONO. 18/03 Prev PD)
Utility Accounting	Date 0/12/05
VALUE FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1. Grand Junction Zoning & Development Code)	

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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)

