	FEE \$	101
	TCP \$	500,-
7	SIF\$	292:-

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

BLDG PERMIT NO.

(Goldenrod: Utility Accounting)

(Single Family Residential and Accessory Structures)

Community Development Department

Building Address God Schurch Gent cf	No. of Existing Bldgs $__$	No. Proposed						
Parcel No. 2701-761-45-008	Sq. Ft. of Existing Bldgs	Sq. Ft. Proposed 2600						
Subdivision <u>Survice ly 11</u>	Sq. Ft. of Lot / Parcel	004						
Filling 5 Block 2 Lot 8	Sq. Ft. Coverage of Lot by Structures (Total Existing & Proposed)	& Impervious Surface						
OWNER INFORMATION:	Height of Proposed Structure	151						
Name LGD Lough puc	DESCRIPTION OF WORK & INTE							
Address Box 1925	New Single Family Home (*check type below) Interior Remodel Addition							
City / State / Zip 65- 681502	Other (please specify):	OWNHOME						
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED:							
Name 16D Cent. INC	Manufactured Home (HUD)	Manufactured Home (UBC)						
Address Box 1925	Other (please specify):							
City / State / Zip Co J - Co	NOTES:							
Telephone 6/53 Z								
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all exproperty lines, ingress/egress to the property, driveway location								
THIS SECTION TO BE COMPLETED BY COMM	IUNITY DEVELOPMENT DEPARTM	MENT STAFF						
ZONE P.D - PRIATE	Maximum coverage of lot by structi	res <u>50%</u>						
SETBACKS: Front 20' from property line (PL)	Permanent Foundation Required: `	YESNO						
Side 7/ from PL Rear 5 from PL	Parking Requirement							
Maximum Height of Structure(s) 32/	Special Conditions Eng. 100							
Voting District Driveway Location Approval (Engineer's Initials)	Lee recorded plat.	for additumed						
Modifications to this Planning Clearance must be approved, structure authorized by this application cannot be occupied u Occupancy has been issued, if applicable, by the Building De	ntil a final inspection has been comp	leted and a Certificate of						
I hereby acknowledge that I have read this application and the ordinances, laws, regulations or restrictions which apply to the action, which may include but not recessarily be limited to not	project. I understand that failure to c							
Applicant Signature Multure	Date	-4-05						
Department Approval KVX parting Val de	Date	7-05						
Additional water and/or sewer tap fee(s) are required YSS) NO W/O No. 18/							
	E) 140 140 140; 1.00	017						
Utility Accounting \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Date Date	5						

(Pink: Building Department)

APPRO 1 DEL TRE CEN DENT Y DEFT RESPONDING: LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.

FORMATION	SUMMERHILL	6	2	7 86 58	862 & 864 SUMMER BEND CT	MESA	565 SF	.942 SF	50.00	1974 SF	6245 SF	5988 SF	FRONT 2C'	SIDES :1	REAR 18
SITE PLAN INFORMATION	SUBDIVISION NAME	FILING NUMBER	BLOCK NUMBER	LOT NUMBER	STREET ADDRESS	~N100	862 CARAGE SO. FT.	862 LIVING SO FI.	564 CARACI SC. FT	854 LVNG SQ. FT.	101 7 101 SIZE	321S LC1 8 LC.		SE SAUKS USED	

