•	78619-2140			
FEE \$ 10.001 PLANNING CLEA				
TCP \$ (Single Family Residential and A				
SIF \$ Community Development	ent Department			
Building Address <u>508 N. 234 ST. 6.</u>	No. of Existing Bldgs No. Proposed			
Parcel No. 2945-131-15-017	Sq. Ft. of Existing Bldgs <u>260</u> Sq. Ft. Proposed <u>216</u>			
subdivision Mlsa Gardens	Sq. Ft. of Lot / Parcel			
Filing Block Lot	Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed)			
OWNER INFORMATION:	Height of Proposed Structure			
Name DON CIRIACKS	DESCRIPTION OF WORK & INTENDED USE:			
Address 508 N. 234	New Single Family Home (*check type below)			
City / State / Zip 61, W \$1501	X Other (please specify): <u>Change Use of Garage to a</u> Play Room - Add Wall + Several Our Hets			
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED:			
Name <u>ABOYE</u>	Site Built Manufactured Home (UBC) Manufactured Home (HUD) Other (please specify):			
Address				
City / State / Zip	NOTES: Interior Kenadel			
Telephone201-0096				
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 KAY X	Aximum coverage of lot by structures			
SETBACKS: Front from property line (PL)	Permanent Foundation Required: YESNO			
Side from PL Rear from PL	Parking Requirement			
Maximum Height of Structure(s)	Special Conditions			
Driveway Voting District Location Approval (Engineer's Initials	s)			
	, in writing, by the Community Development Department. The until a final inspection has been completed and a Certificate of epartment (Section 305, Uniform Building Code).			
	e information is correct; I agree to comply with any and all codes, e project. I understand that failure to comply shall result in legal on-use of the building(s).			
Applicant Signature Ann Grigorchis Date 10 500				
Department Approval August Approv				

\$

Applicant Signature	En alacher	Date _/(2) 53(
Department Approval	And Lephan	Date 10 5	070	
Additional water and/or sew	ver tap fee(s) are required: YES	NO) W/O No. K	JO CHANGE WATErbur	
Utility Accounting	11	Date 10 0	5106	
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning & Development Code)				
(White: Planning) (1	Yellow: Customer) (Pink: Buildin	ng Department) (G	oldenrod: Utility Accounting)	

508 N. 232 ST 64RAGE

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