

FEE \$ 10.⁰⁰/₁₀₀
 TCP \$ 1539.⁰⁰/₁₀₀
 SIF \$ 460.⁰⁰/₁₀₀

BLDG PERMIT NO. _____

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

Building Address 335 CLIFF VIEW No. of Existing Bldgs _____ No. Proposed 1
 Parcel No. PARENT (2945 2011 000) 2945-201-63-024 Sq. Ft. of Existing Bldgs _____ Sq. Ft. Proposed 2438
 Subdivision SHADOW RUN Sq. Ft. of Lot / Parcel 2039
 Filing MA Block MA Lot 14 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) 2359
 A Height of Proposed Structure 20'

OWNER INFORMATION:

Name HARVEST HOMES
 Address 4833 FRONT ST.
 City / State / Zip C.R., CO 80104

DESCRIPTION OF WORK & INTENDED USE:

New Single Family Home (*check type below)
 Interior Remodel Addition
 Other (please specify): _____

APPLICANT INFORMATION:

Name JAMES SANTACROCE
 Address 632 KAREN CT.
 City / State / Zip GS, CO 80504
 Telephone 970-285-5958

***TYPE OF HOME PROPOSED:**

Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): _____

NOTES: Duplex (1 of 2)
S/F ATTACHED

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 RD Maximum coverage of lot by structures _____
 SETBACKS: Front 20' on grade from property line (PL) Permanent Foundation Required: YES 4 NO _____
 Side 14 from PL Rear _____ from PL Parking Requirement 2
 Maximum Height of Structure(s) 20' on grade / 2nd story Special Conditions in building envelope
 Voting District A Driveway Location Approval 3/4 (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 _____
 Department Approval [Signature] Date _____

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>19811</u>
Utility Accounting <u>[Signature]</u>	Date <u>12/22/06</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)

EXISTING IRRIGATION EASEMENT
5' EITHER SIDE OF LOT LINE

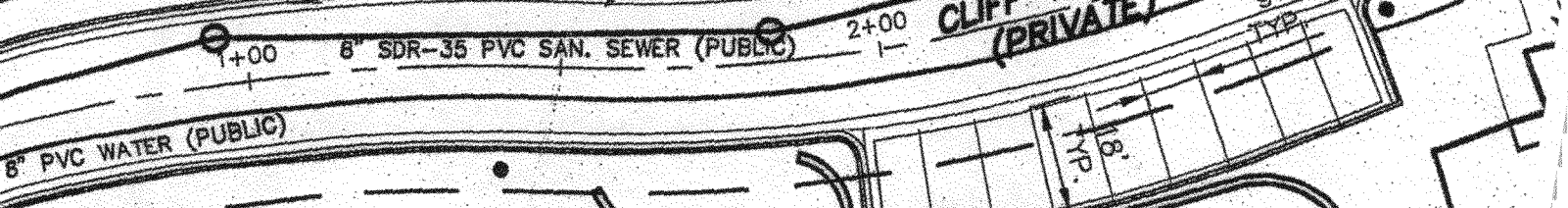
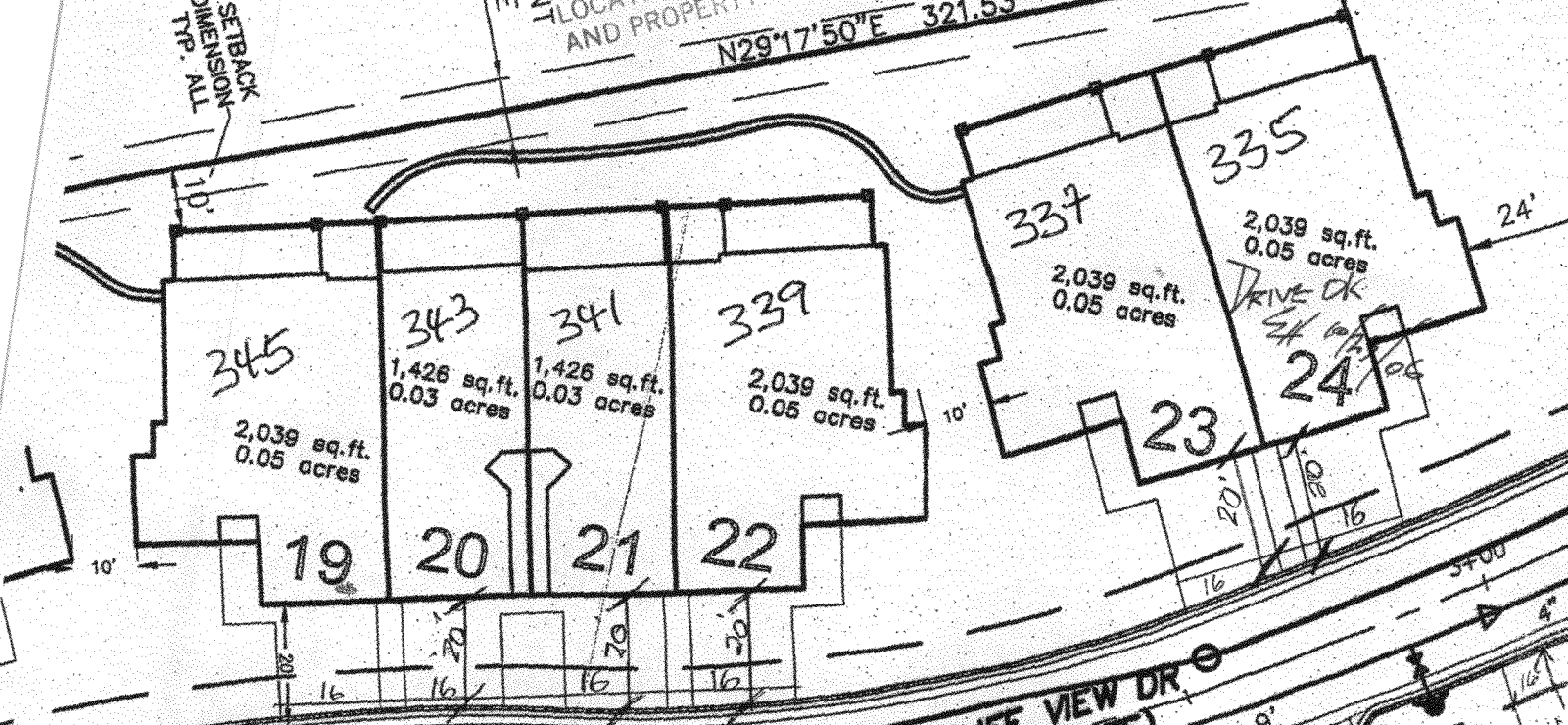
ACCEPTED... TRACKS MUST BE
ANY CHANGES TO CITY PLANNING
APPROVED... CITY PLANNING
DEPT... IS THE APPLICANT'S
RESPONSIBILITY TO PROPERLY
LOCATE AND IDENTIFY EASEMENTS
AND PROPERTY LINES.

W. K. Maguire

ZONE PD
DRAINAGEWAY

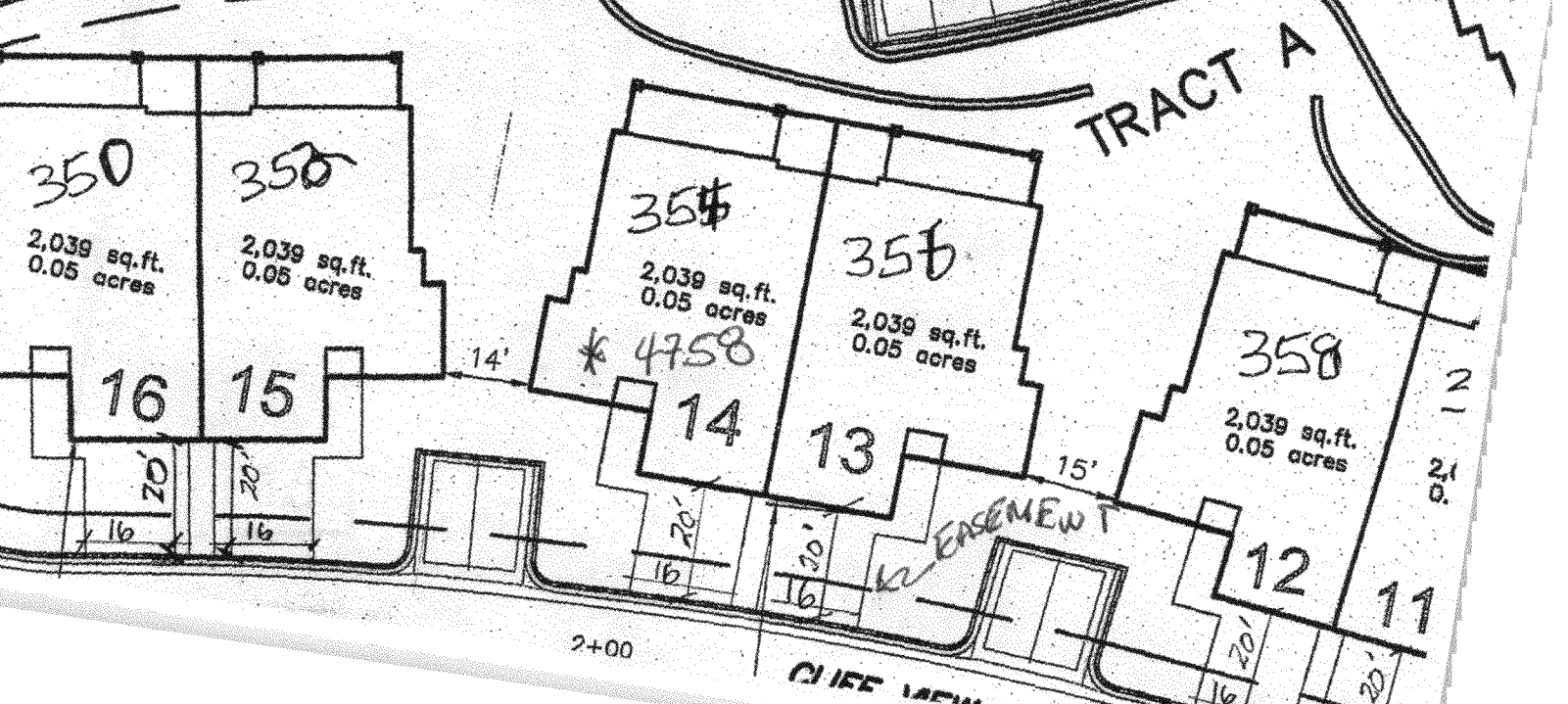
BUILDING SETBACK
DIMENSION
TYP. ALL

N29°17'50"E 321.53'



CLIFF VIEW DR
(PRIVATE)

TRACT A



EASEMENT

CLIFF VIEW DR