FEE\$	10.00
TCP\$	1039.00
SIF\$	460.00

PLANNING CLEARANCE

BLDG	PERMIT	NO.

(Single Family Residential and Accessory Structures)

Community Development Department

Building Address 345 CCIH VIEW	No. of Existing Bldgs	No. Proposed
Parcel No. <u>794520/1000/</u>	Sq. Ft. of Existing Bldgs	Sq. Ft. Proposed <u>2039</u>
Subdivision SHADOW RUN	Sq. Ft. of Lot / Parcel	?
Filing NA Block NA Lot 19	Sq. Ft. Coverage of Lot by Structure (Total Existing & Proposed)	es & Impervious Surface
OWNER INFORMATION:	Height of Proposed Structure	70
Name HARVEST HOMES	DESCRIPTION OF WORK & INT New Single Family Home (*ch	
Address 4823 FRONT STREET	Interior Remodel	Addition
City / State / Zip CASTLE ROCK, CO 80104	Other (please specify):	
Name JAMES SANTACROCE	*TYPE OF HOME PROPOSED: Site Built Manufactured Home (HUD) Other (please specify):] Manufactured Home (UBC)
Address 632 KAREW COURT		
City / State / Zip <u>\$5, CO</u> 81504	NOTES: 4-72	
Telephone 970.245.5958		
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all e property lines, ingress/egress to the property, driveway location		
THIS SECTION TO BE COMPLETED BY COM	MUNITY DEVELOPMENT DEPAR	TMENT STAFF
ZONE PD	Maximum coverage of lot by stru	ictures per pla
SETBACKS: Front & Charleton property line (PL)	Permanent Foundation Required	d: YESNO
Side in from PL Rear if from PL	Parking Requirement 2	,
Maximum Height of Structure(s) 20 hanch 26'2 story	Special Conditions on Eucl	In Enelope
Voting District A Driveway Location Approval (Engineer's Initials	<u> </u>	0
Modifications to this Planning Clearance must be approved structure authorized by this application cannot be occupied Occupancy has been issued, if applicable, by the Building D	until a final inspection has been co	mpleted 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 necessalily be limited to n	ne project. I understand that failure to on-use of the building(s).	to comply shall result in legal
Applicant Signature Company Co	use Date 11-2	1.06
Department Approval	Date /	06
Additional water and o sewer tap fee(s) are required: YE	NO W/O No.	9/14
Utility Accounting	Date 11/2	Ü
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Se		•

