

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

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. _____

Building Address 366 CLIFF VIEW
 Parcel No. 298520110001
 Subdivision SHADOW RUN
 Filing NA Block NA Lot 8

No. of Existing Bldgs _____ No. Proposed 1
 Sq. Ft. of Existing Bldgs _____ Sq. Ft. Proposed 2438
 Sq. Ft. of Lot / Parcel 2039
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) 2359
 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 SANTA RODE
 Address 632 KAREN COURT
 City / State / Zip GS, CO 81507
 Telephone 970-285-5958

***TYPE OF HOME PROPOSED:**

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

NOTES: Duplex (1 of 2)

SIF ATTACHMENT

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 PD Maximum coverage of lot by structures _____
 SETBACKS: Front 20' garage from property line (PL) Permanent Foundation Required: YES A NO _____
 Side 12 from PL Rear _____ from PL Parking Requirement 2
 Maximum Height of Structure(s) 20' max 1 1/2 story Special Conditions Per building envelope
 Voting District A Driveway Location Approval EH
 (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>19822</u>
Utility Accounting	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)