

FEE \$	10.00
TCP \$	1500.00
SIF \$	292.00

# PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

**Community Development Department**

BLDG PERMIT NO. \_\_\_\_\_

Building Address 691 695 Clover Dale  
 Parcel No. 2945-022-04-008  
 Subdivision Glencaro Sub  
 Filing \_\_\_\_\_ Block \_\_\_\_\_ Lot 17

No. of Existing Bldgs N/A No. Proposed 1  
 Sq. Ft. of Existing Bldgs 2000 Sq. Ft. Proposed 2000  
 Sq. Ft. of Lot / Parcel 3/4 AC  
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) \_\_\_\_\_  
 Height of Proposed Structure \_\_\_\_\_

**OWNER INFORMATION:**

Name Gil Madison  
 Address 695 Clover Dale  
 City / State / Zip CO, CO 81506

**DESCRIPTION OF WORK & INTENDED USE:**

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

**APPLICANT INFORMATION:**

Name Concept Builders  
 Address 2624 N 3/4 Rd  
 City / State / Zip CO, CO 81506  
 Telephone 234-0750

**\*TYPE OF HOME PROPOSED:**

- Site Built  Manufactured Home (UBC)
- Manufactured Home (HUD)
- Other (please specify): \_\_\_\_\_

NOTES: \_\_\_\_\_

**\*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 <u>RSF-1</u>	Maximum coverage of lot by structures <u>20%</u>
SETBACKS: Front <u>20'</u> from property line (PL)	Permanent Foundation Required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Side <u>15'</u> from PL Rear <u>30'</u> from PL	Parking Requirement <u>2</u>
Maximum Height of Structure(s) <u>35'</u>	Special Conditions _____
Voting District <u>B</u> Driveway Location Approval <u>RAY</u> (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).

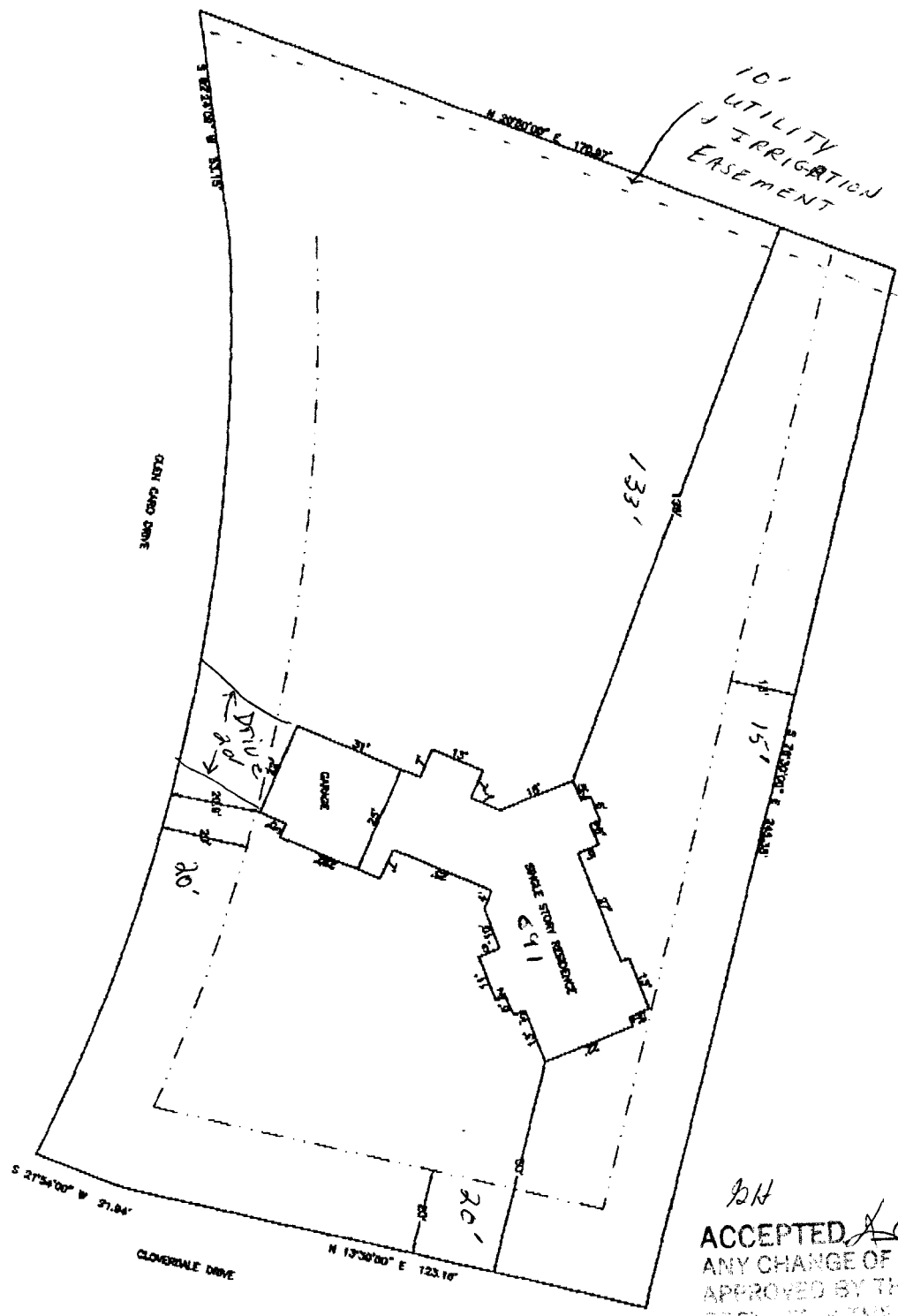
Applicant Signature [Signature] Date 12-28-05  
 Department Approval [Signature] Date 1-10-06

Additional water and/or sewer tap fee(s) are required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	W/O No. <u>18735</u>
Utility Accounting <u>[Signature]</u>	Date <u>1/6/06</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)

SETBACK LINE

US200



9/14  
 ACCEPTED *Kathy Valle*  
 ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IN WRITING. SUBJECTS RESPONSIBILITY FOR ALL PERMITS, EASEMENTS AND FINANCIALS.

2945-022-04-008

*N*

695 Clover Dale DR

1-6-06  
*David*  
*Pick*  
 12-30-05