

FEE \$	10.00
TCP \$	1559.00
SIF \$	400.00

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. _____

Lifstation Impact Fee = 1,104.00
 Building Address 2651 EAGLE RIDGE CT
 Parcel No. 294526441016
 Subdivision SPYGLASS RIDGE
 Filing 1 Block _____ Lot 79

No. of Existing Bldgs 0 No. Proposed 1
 Sq. Ft. of Existing Bldgs 0 Sq. Ft. Proposed 2200
 Sq. Ft. of Lot / Parcel 10,642
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) 2200
 Height of Proposed Structure 18'

OWNER INFORMATION:

Name MARC LITZEN
 Address 619 STARLIGHT DR
 City / State / Zip GA, GA 31504

DESCRIPTION OF WORK & INTENDED USE:
 New Single Family Home (*check type below)
 Interior Remodel Addition
 Other (please specify): _____

APPLICANT INFORMATION:

Name Same as above
 Address _____
 City / State / Zip _____
 Telephone 970-434-6810

*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-2</u>	Maximum coverage of lot by structures <u>30%</u>		
SETBACKS: Front <u>25'</u> from property line (PL)	Permanent Foundation Required: YES <u>X</u> NO _____		
Side <u>10'</u> from PL Rear <u>15'</u> from PL	Parking Requirement <u>2</u>		
Maximum Height of Structure(s) <u>35'</u>	Special Conditions <u>Engineered foundations required</u>		
Voting District <u>E</u>	Driveway Location Approval <u>TRAD</u> (Engineer's Initials)	<u>Site specific grading & drainage plans prepared by registered engineer required for all lots</u>	

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 Marc Litzen Date 4/20/06
 Department Approval NA Wendy Spure Date 4/24/06

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>paid @ oms</u>
Utility Accounting <u>Wendy Spure</u>	Date <u>4/24/06</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)

