

FEE \$	10.00
TCP \$	
SIF \$	

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO.

Building Address 360 McFarland Dr No. of Existing Bldgs 1 No. Proposed 0
 Parcel No. 2945-112-22-011 Sq. Ft. of Existing Bldgs 2200 Sq. Ft. Proposed 4900
 Subdivision McFarland Sub Sq. Ft. of Lot / Parcel _____
 Filing _____ Block 2 Lot 4 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____
 Height of Proposed Structure 9 FT

OWNER INFORMATION:

Name Leo Thiessen
 Address 360 McFarland Dr
 City / State / Zip G. J. Co

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name David Painter
 Address 190 Rosalie Dr
 City / State / Zip G. J. Co 81503
 Telephone 216-6469

***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 R&F-4 Maximum coverage of lot by structures _____
 SETBACKS: Front 20' from property line (PL) Permanent Foundation Required: YES _____ NO X
 Side 7' from PL Rear 25' from PL Parking Requirement 2
 Maximum Height of Structure(s) 35' Special Conditions _____
 Voting District _____ Driveway Location Approval _____
 (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 8-1-06
 Department Approval [Signature] Date 8/1/06

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No.
Utility Accounting	Date		

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)

City of Grand Junction GIS Zoning Map ©

Airport Zones

- AIRPORT ROAD
- - CLEAR ZONE
- CRITICAL ZONE
- RUNWAY 22
- RUNWAY 29
- TAXI WAY
- Zoom in for Noise Contors

Rural Roads Large Text

Streets

All Parcels

- Parcels
- Address Label

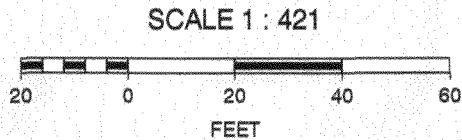
Palisade Grand Jct Buffer Zone

Fruita / Grand Junction Buffer

Urban Growth Boundary

Air Photos

- 2002 Photos



ACCEPTED *W. Asher* 8/1/06
 ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.

*12x8
 96 sq ft*

