

FEE \$	10 ⁰⁰
TCP \$	500 ⁰⁰
SIF \$	460

PLANNING CLEARANCE
(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. _____

Building Address 458 Shadow Rock Ct
 Parcel No. 2947-271-15-010
 Subdivision The Seasons
 Filing 6 Block _____ Lot 10

No. of Existing Bldgs 0 No. Proposed 1
 Sq. Ft. of Existing Bldgs 0 Sq. Ft. Proposed 4248
 Sq. Ft. of Lot / Parcel 17,034
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) 6,000
 Height of Proposed Structure 24'

OWNER INFORMATION:

Name Cornelius & Sue Sullivan
 Address 88 Warrington Dr
 City / State / Zip Lake Bluff, IL 60044

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

APPLICANT INFORMATION:

Name Maves Construction
 Address P.O. Box 670
 City / State / Zip Fruita, Co 81521
 Telephone 858-9642

*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>PO</u> <u>per plans</u>	Maximum coverage of lot by structures _____
SETBACKS: Front <u>20</u> from property line (PL)	Permanent Foundation Required: YES <input checked="" type="checkbox"/> NO _____
Side <u>20</u> from PL Rear <u>15</u> from PL	Parking Requirement <u>2</u>
Maximum Height of Structure(s) <u>22'</u>	Special Conditions _____
Voting District _____	Driveway Location Approval <u>RAD</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 12/24/06
 Department Approval JAK [Signature] Date 12/29/06

Additional water and/or sewer tap fee(s) are required: YES <input checked="" type="checkbox"/> NO _____	W/O No. <u>19872</u>
Utility Accounting <u>[Signature]</u>	Date <u>12/29/06</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)

458 Shadow Rock Ct.

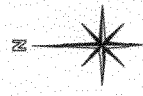
LOT 10

THE SEASONS AT TIARA RADO

FILING No. 6 SEC. 27 11S 101W & AN UND.

INT. INTRACTS

TAX ID# 2947-271-15-010

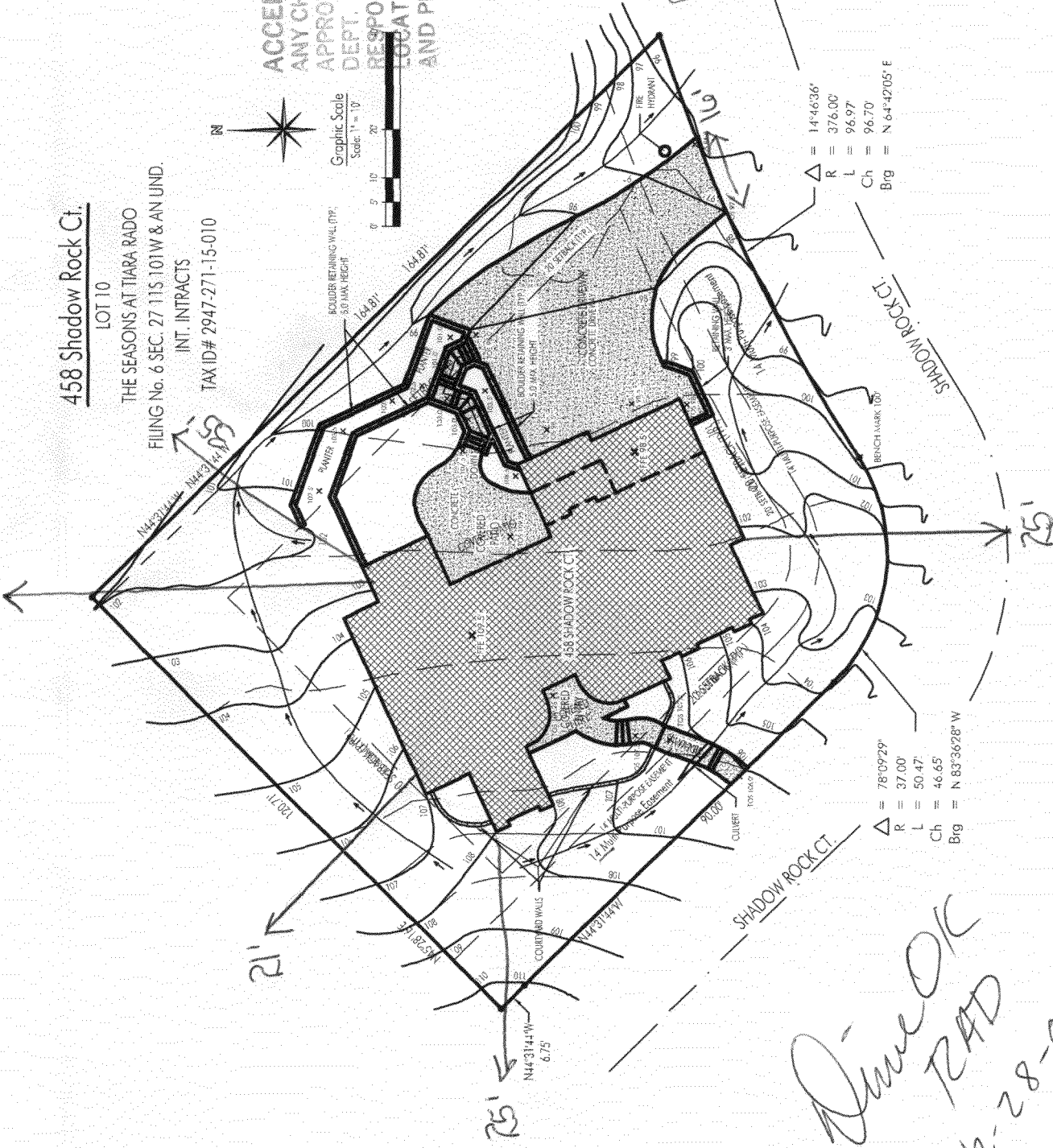


Graphic Scale
Scale: 1" = 10'



Accepted
ACCEPTED
ANY CHANGE OF SEADKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES

Dime O.K. SRA



$\Delta = 78^{\circ}09'29''$
 $R = 37.00'$
 $L = 50.47'$
 $Ch = 46.65'$
 $Brg = N 83^{\circ}36'28'' W$

$\Delta = 14^{\circ}46'36''$
 $R = 376.00'$
 $L = 96.97'$
 $Ch = 96.70'$
 $Brg = N 64^{\circ}42'05'' E$

*Dime OK
TRAD
12-28-06*

SITE PLAN

SCALE: 1" = 30'-0"