

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 458 Washburn St
Parcel No. 2943-161-31-001
Subdivision ~~Chaffield 2~~ Dakota west
Filing 1 Block 5 Lot 1

No. of Existing Bldgs 0 No. Proposed 1
Sq. Ft. of Existing Bldgs 0 Sq. Ft. Proposed 1782
Sq. Ft. of Lot / Parcel 6717
Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) 2449
Height of Proposed Structure 17'-8"

OWNER INFORMATION:

Name Todd Smith
Address _____
City / State / Zip _____

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name Matt Steckman
Address 261 Westwater Cir
City / State / Zip Fruita Co 81524
Telephone 970-261-9644

***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>RMF-5</u>	Maximum coverage of lot by structures <u>60%</u>
SETBACKS: Front <u>20'</u> from property line (PL)	Permanent Foundation Required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Side <u>5'</u> from PL Rear <u>25'</u> from PL	Parking Requirement <u>2</u>
Maximum Height of Structure(s) <u>35'</u>	Special Conditions _____
Voting District <u>C</u> Driveway Location Approval _____ (Engineer's Initials)	

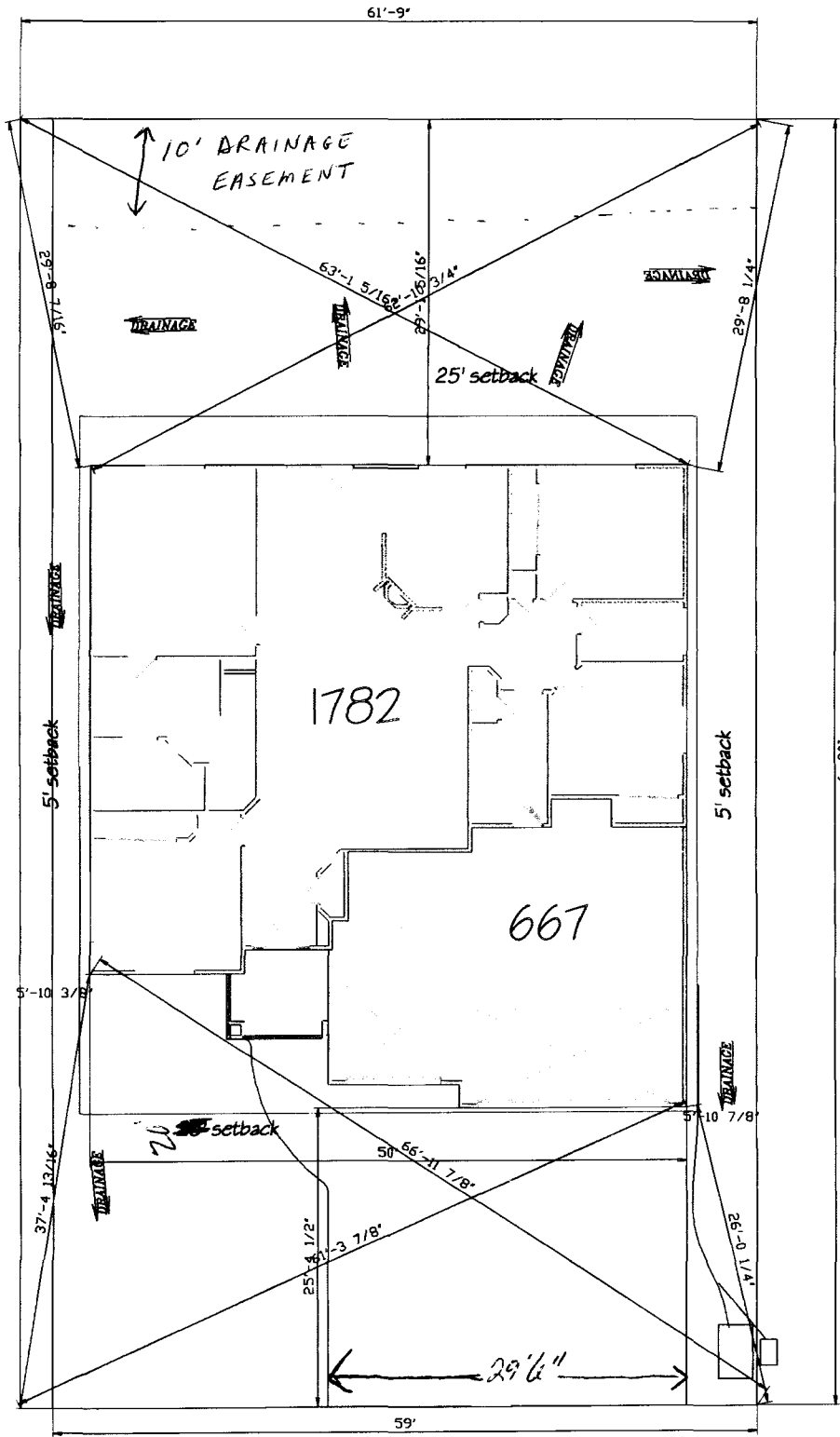
Modifications to this Planning Clearance must be approved, in writing, by the Community Development Department. The structure authorized by this application cannot be occupied until a final inspection has been completed and a Certificate of Occupancy has been issued, if applicable, by the Building Department (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 Sheryl Kelley Date 4-29-06
Department Approval WS Gayleen Henderson Date 4-26-06

Additional water and/or sewer tap fee(s) are required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	W/O No. <u>Paid @ CIV.</u>
Utility Accounting <u>Kate Gelsberry</u>	Date <u>4/26/06</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 Washburn St.
1" = 15'-0"

11.5 *Rayen Anderson* 4/20/00

ALL INFORMATION CONTAINED HEREIN MUST BE
 ACCURATE AND COMPLETE. ANY CHANGES
 TO THIS PLAN MUST BE APPROVED BY THE
 LOCAL HEALTH DEPARTMENT. THIS PLAN IS
 VALID ONLY FOR THE PURPOSES OF THE
 LOCAL HEALTH DEPARTMENT'S EASEMENTS
 AND PROPERTY LINES.

DRIVE O.K.
Wm [unclear] (KENT WASH)
 4/20/00