

CITY

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| FEE \$ <u>10.00</u> |
| TCP \$ |
| SIF \$ |

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

BLDG PERMIT NO. _____

Building Address 2494 WELLINGTON CT
 Parcel No. 2745-122-25-002
 Subdivision COTTAGES AT WELLINGTON
 Filing 1 Block 2 Lot 2

No. of Existing Bldgs 1 No. Proposed _____
 Sq. Ft. of Existing Bldgs 1263 Sq. Ft. Proposed 128
 Sq. Ft. of Lot / Parcel 5224
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) 1509.75
 Height of Proposed Structure 11'8"

OWNER INFORMATION:

Name Carol Griffith
 Address 2494 Wellington Ct
 City / State / Zip GRD Jct

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name RW Jones Coast Inc
 Address 1880 K Rd
 City / State / Zip Fruita Co 81521
 Telephone 970 858-3396

***TYPE OF HOME PROPOSED:**

Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): _____

NOTES: This addition will be a 8x16
Ft screened in porch

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 PO Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL) Permanent Foundation Required: YES NO _____
 Side 5' from PL Rear 15' from PL Parking Requirement 2
 Maximum Height of Structure(s) _____ 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).

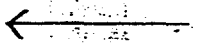
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily be limited to non-use of the building(s).

Applicant Signature [Signature] Date 5-2-06
 Department Approval [Signature] Date 5-2-06

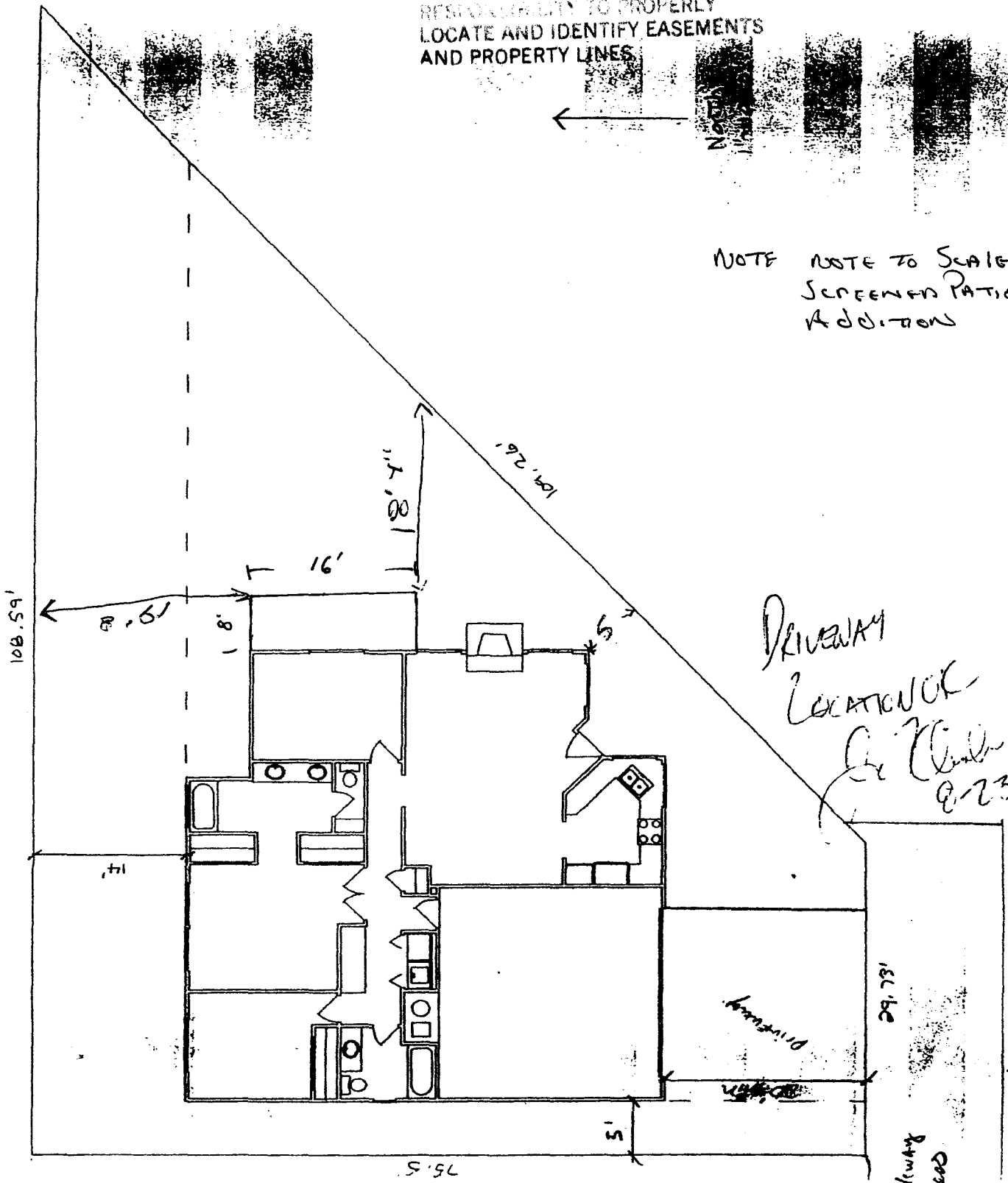
| | | | |
|--|--------------------|--|-------------------------------------|
| Additional water and/or sewer tap fee(s) are required: | YES | NO <input checked="" type="checkbox"/> | W/O No. <u>existing permit 7944</u> |
| Utility Accounting <u>Kate C. Sperry</u> | Date <u>5/2/06</u> | | |

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)

ACCEPTED *Walter Crayton 5/2/00*
 ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPARTMENT. THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.



NOTE NOTE TO SCALE
 SCREENED PATIO
 ADDITION



*DRIVEWAY
 LOCATION OK
 See [unclear]
 8-23-96*

*15' BE
 DRIVEWAY
 10/1/00
 10/1/00*