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

BLDG PERMIT NO. \_\_\_\_\_

Building Address 675 1/2 24 1/2 Rd  
 Parcel No. 2945-042-00-159  
 Subdivision N/A  
 Filing \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

No. of Existing Bldgs 2 No. Proposed 1  
 Sq. Ft. of Existing Bldgs \_\_\_\_\_ Sq. Ft. Proposed \_\_\_\_\_  
 Sq. Ft. of Lot / Parcel 4.8 Acres  
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) \_\_\_\_\_  
 Height of Proposed Structure \_\_\_\_\_

**OWNER INFORMATION:**

Name Gary Rindeale Const Inc  
 Address P.O. Box 1380  
 City / State / Zip Clifton, CO. 81520

**DESCRIPTION OF WORK & INTENDED USE:**

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

**APPLICANT INFORMATION:**

Name Sam  
 Address \_\_\_\_\_  
 City / State / Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_

**\*TYPE OF HOME PROPOSED:**

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

NOTES:

Demo Only Garage only

**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 _____	Maximum coverage of lot by structures _____
SETBACKS: Front _____ from property line (PL)	Permanent Foundation Required: YES _____ NO _____
Side _____ from PL Rear _____ from PL	Parking Requirement _____
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 \_\_\_\_\_ Date \_\_\_\_\_

Department Approval Wendy Spive Date 5/8/07

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No. <u>no sewer to garage</u>
Utility Accounting <u>Cate Cebbery</u>	Date <u>5/8/07</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)