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Utility Accounting

PLANNING CLEARANCE

BLDG PERMIT NO.

(Single Family Residential and Accessory Structures)

Community Development Department

No. of Existing Bldgs **Building Address** No. Proposed ろいん Sq. Ft. of Existing Bldgs ___ Sq. Ft. of Lot / Parcel 4673 Subdivision Sq. Ft. Coverage of Lot by Structures & Impervious Surface Filing (Total Existing & Proposed) 2305 SQ F OWNER INFORMATION: Height of Proposed Structure **DESCRIPTION OF WORK & INTENDED USE:** New Single Family Home (*check type below) Address Interior Remodel Addition Other (please specify): City / State / Zip **APPLICANT INFORMATION:** TYPE OF HOME PROPOSED: Site Built Manufactured Home (UBC) Manufactured Home (HUD) Name Other (please specify): Address NOTES: New City / State / Zip 434-0510 Telephone 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 Permanent Foundation Required: YES X NO SETBACKS: Front from property line (PL) *10* ′ from PL Side from PL Parking Requirement Maximum Height of Structure(s) Special Conditions Driveway Voting District 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 _ Department Approval N Additional water and/or sewer tap fee(s) are required: NO W/O No.

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)

Date

