

FEE \$	10.00
TOP \$	1589.00
SIF \$	460.00

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

BLDG PERMIT NO. _____

Building Address 411 29 1/2 Rd
 Parcel No. 2943-173-44-003
 Subdivision COUNTRY PLACE ESTATES
 Filing 1 Block 7 Lot 3

No. of Existing Bldgs 0 No. Proposed 1
 Sq. Ft. of Existing Bldgs 0 Sq. Ft. Proposed 1794
 Sq. Ft. of Lot / Parcel 4521
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) 2455
 Height of Proposed Structure 24

OWNER INFORMATION:

Name TML ENTERPRISES INC
 Address P.O. Box 2569
 City / State / Zip G.J. CO 81502

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name TML ENTERPRISES INC
 Address P.O. Box 2569
 City / State / Zip G.J. CO 81502
 Telephone 970-245-9271

***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>K-8</u>	Maximum coverage of lot by structures <u>70%</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>10</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 <u>JAR</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).

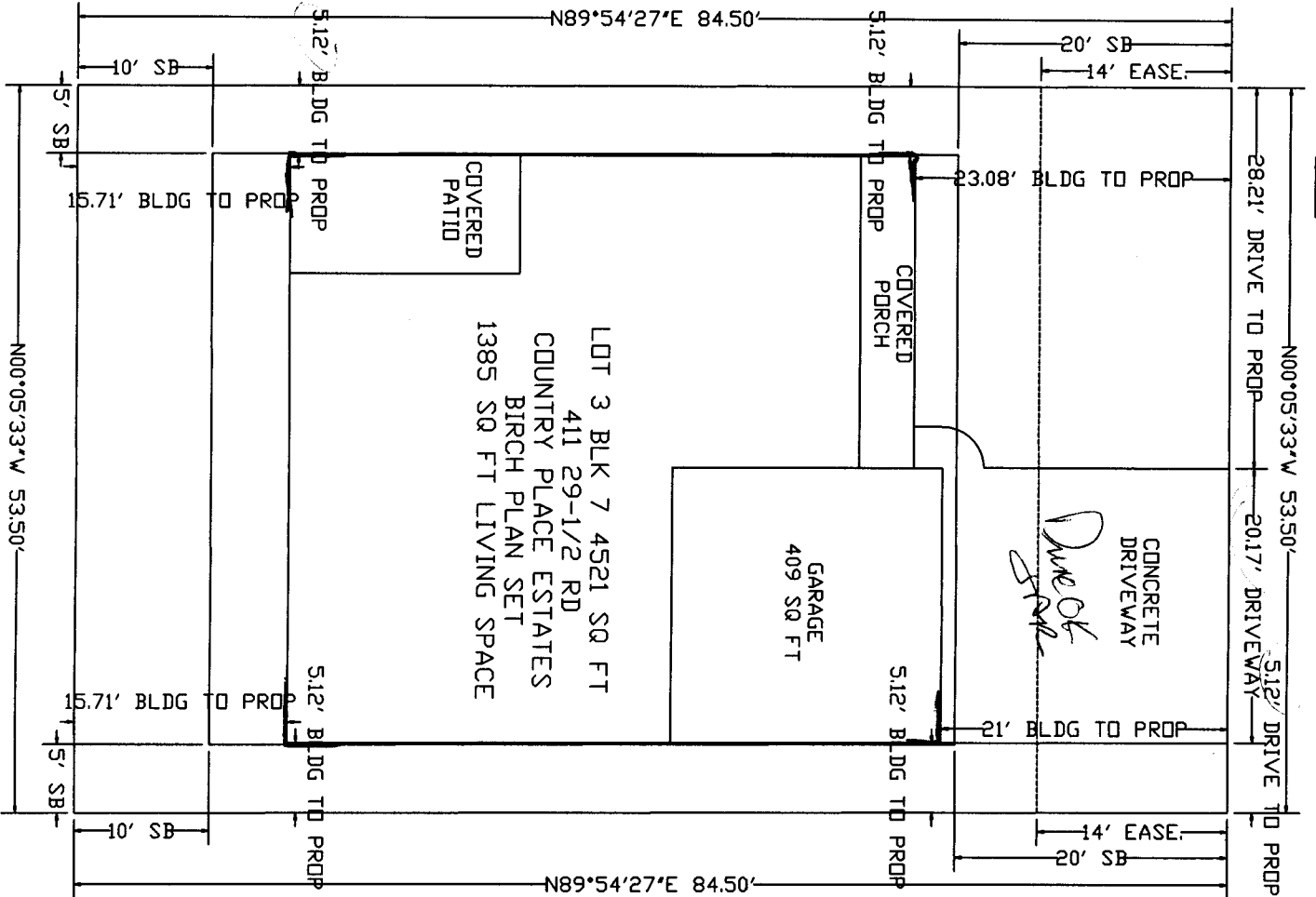
Applicant Signature [Signature] Date 3-MAY-07

Department Approval [Signature] Date _____

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>20272</u>
Utility Accounting	Date <u>5-16-07</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)

29-1/2 ROAD



ACCEPTED BY: *JAR Wendy Spivey*
 DATE: _____
 COUNTY: _____
 TOWN: _____
 SECTION: _____
 AND PROPERTY LINES

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				SHEET: C1