## TCP\$ 1589.00 SIF\$ 4100.00

(White: Planning)

(Yellow: Customer)

## **PLANNING CLEARANCE**

BLDG PERMIT NO.	
DEDG : CHIMIT ITO:	

(Goldenrod: Utility Accounting)

(Single Family Residential and Accessory Structures)

## **Community Development Department**

Building Address 2860 BASIL	No. of Existing Bldgs No. Proposed
Parcel No. 2943-191-39-009	Sq. Ft. of Existing Bldgs O Sq. Ft. Proposed 13/7
Subdivision WHITE WILLOWS	Sq. Ft. of Lot / Parcel 8,500 SW FT
Filing 2 Block 5 Lot 9	Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed)
OWNER INFORMATION:	Height of Proposed Structure
Name GARY Kinderle Const Inc	DESCRIPTION OF WORK & INTENDED USE:
Address Po Box 1380	New Single Family Home (*check type below) Interior Remodel  Other (standard partition)
City/State/Zip Cliston, Co. 81520	Other (please specify):
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED:
Name SAME AS OWNER	Site Built Manufactured Home (UBC)  Manufactured Home (HUD)  Other (places specify):
Address	Other (please specify):
City / State / Zip NO	TES: NEW SFR
Telephone <u>434-0570</u>	
	isting & proposed structure location(s), parking, setbacks to all
property lines, ingress/egress to the property, driveway location	a & width & all easements & rights-of-way which abut the parcel.
THIS SECTION TO BE COMPLETED BY COMM	
THIS SECTION TO BE COMPLETED BY COMM	UNITY DEVELOPMENT DEPARTMENT STAFF
THIS SECTION TO BE COMPLETED BY COMM	Maximum coverage of lot by structures 50 %
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THIS SECTION TO BE COMPLETED BY COMM  ZONE	Permanent Foundation Required: YES X NO

(Pink: Building Department)

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ACCEPTED MALA MUST BE ANY CHANGE OF SETBACKS MUST BE SET PPLICANTS
DEPT IT IS THE APPLICANTS
RESPONSIBILITY TO PROPERLY
AND PROPERTY LINES

