

FEE \$	10.00
TCP \$	/
SIF \$	/

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

BLDG PERMIT NO. _____

Building Address 611 Bluegill Dr
 Parcel No. 2943-104-05-002
 Subdivision _____
 Filing _____ Block _____ Lot _____

No. of Existing Bldgs 2 No. Proposed 0
 Sq. Ft. of Existing Bldgs 816 Sq. Ft. Proposed Addition 800 sq.
 Sq. Ft. of Lot / Parcel .223 Ac
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) 1616
 Height of Proposed Structure at existing

OWNER INFORMATION:

Name Wallace Martin
 Address 611 Bluegill Dr.
 City / State / Zip CO CO 81505

DESCRIPTION OF WORK & INTENDED USE:

- New Single Family Home (*check type below)
- Interior Remodel
- Addition
- Other (please specify) Adding 1 Restroom

APPLICANT INFORMATION:

Name _____
 Address _____
 City / State / Zip _____
 Telephone 970-260-3603

***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>RMF-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 _____
Side <u>5</u> from PL Rear <u>10</u> from PL	Parking Requirement <u>/</u>
Maximum Height of Structure(s) <u>35'</u>	Special Conditions _____
Voting District <u>/</u> Driveway Location Approval <u>/</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 Wallace Martin Date 4/4/07
 Department Approval Judith A. Fier Date 4/4/07

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>NO WTR Change Sew Change</u>
Utility Accounting <u>/</u>	Date <u>4/4/07</u> <u>Adding 1 Restroom</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)

City of Grand Junction GIS Zoning Map ©



ACCEPTED *Justin [Signature]* 4/4/07
ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.



SCALE 1 : 310

