FEE \$ 10.507
TCP\$ 1589.007
SIF\$ 460.00)

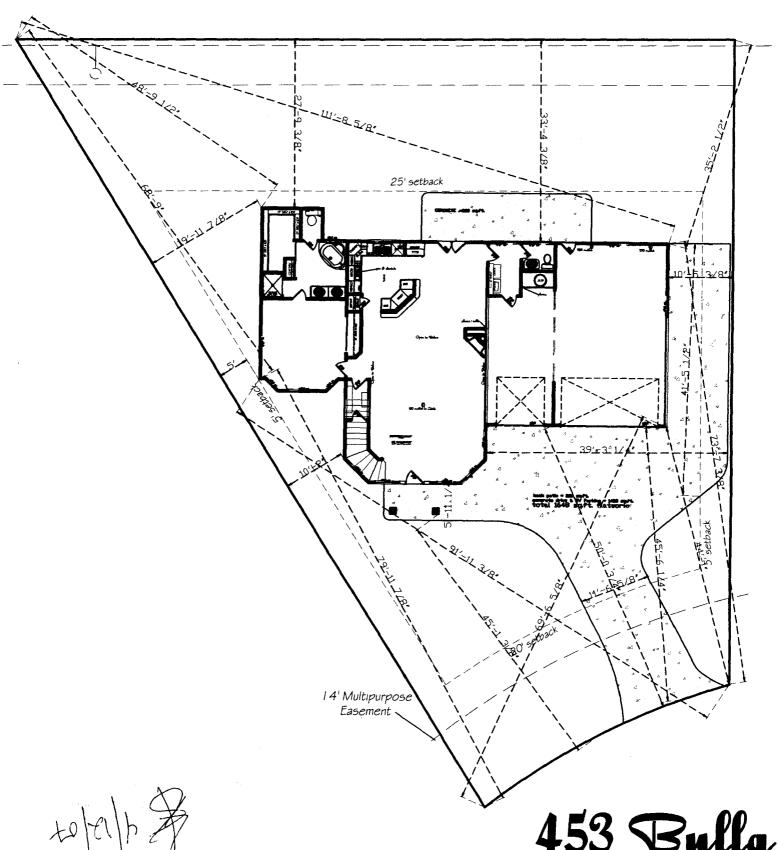
PLANNING CLEARANCE

BLDG PERMIT NO.	

(Single Family Residential and Accessory Structures)

Community Development Department

Building Address 453 Bulla Lank	No. of Existing Bldgs	No. Proposed		
Parcel No. 2943-151-10-009	Sq. Ft. of Existing Bldgs	Sq. Ft. Proposed 2249		
Subdivision Chatfield III	Sq. Ft. of Lot / Parcel95	55		
Filing Block Lot _9	Sq. Ft. Coverage of Lot by Structur	res & Impervious Surface		
OWNER INFORMATION:	(Total Existing & Proposed) Height of Proposed Structure	9'-5'		
Name Daryl & Karen Ball	DESCRIPTION OF WORK & IN New Single Family Home (*ci	ITENDED USE:		
Address	Interior Remodel	Addition		
City / State / Zip	Other (please specify):			
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED			
Name Bookcliff Builders, CCC.	Site Built Manufactured Home (HUD) Other (please specify):	Manufactured Home (UBC)		
Address 1383 Bridle Path Ct				
City / State / Zip Fruits CO 815/2 NO	TES: New Construc	tion		
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 COMM	UNITY DEVELOPMENT DEPAR	RTMENT STAFF		
ZONE RMF-5	Maximum coverage of lot by str	uctures $\frac{Q070}{}$		
SETBACKS: Front 20 from property line (PL)	Permanent Foundation Require			
Side 5 from PL Rear 25 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 ordinances, laws, regulations or restrictions which apply to the action, which may include but not pecessarily be limited to not	project. I understand that failure			
Applicant Signature Dally	Date 3/9/	17		
Department Approva	Date 3 12	LITA		
Additional water and/or sewer tap fee(s) are required: YES	NO W/O No. 2	2142		
Utility Accounting Certecuster	Date 412	6)		
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Sec (White: Planning) (Yellow: Customer) (Pink:		ng & Development Code) Idenrod: Utility Accounting)		



to fall &

453 Bulla