

FEE \$	<u>0</u>
TCP \$	<u>0</u>
SIF \$	<u>0</u>

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

BLDG PERMIT NO. 53988-11741

Building Address 2678 Capra Way.
 Parcel No. 2945-024-01-003
 Subdivision Northern Hills
 Filing _____ Block _____ Lot 3

No. of Existing Bldgs _____ No. Proposed _____
 Sq. Ft. of Existing Bldgs _____ Sq. Ft. Proposed _____
 Sq. Ft. of Lot / Parcel _____
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____
 Height of Proposed Structure _____

OWNER INFORMATION:

Name Scott Hryduch
 Address 2678 Capra Way
 City / State / Zip 81506

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name LGD Const. Inc
 Address PO Box 1925
 City / State / Zip 81502
 Telephone 243-4471

***TYPE OF HOME PROPOSED:**

- Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): _____

NOTES: Kitchen Cabinet Replacement

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>R-4</u>	Maximum coverage of lot by structures <u>50%</u>
SETBACKS: Front <u>20'</u> from property line (PL)	Permanent Foundation Required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Side <u>7'</u> from PL Rear <u>25'</u> from PL	Parking Requirement <u>2</u>
Maximum Height of Structure(s) <u>35'</u>	Special Conditions _____
Voting District <u>B</u> Driveway _____	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 [Signature] Date 9-7-07

Department Approval [Signature] Date 9-7-07

Additional water and/or sewer tap fee(s) are required: YES NO <input checked="" type="checkbox"/>	W/O No. <u>NO change water/sewer</u>
Utility Accounting <u>[Signature]</u>	Date <u>9-7-07</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)