			PH
FEE\$ 10.92	PLANNING CLEA	RANCE	BLDG PERMIT NO.
TCP \$	(Single Family Residential and Ad		108257 9987
SIF \$	Community Developme	nt Department	100000-1100
Building Address	530 Elderborny (Inte	No. of Existing Bldgs	No. Proposed
Parcel No. <u>2945 - 011 - 32 - 007</u>		Sq. Ft. of Existing Bldgs Sq. Ft. Proposed 844	
Subdivision Sprlaglalley		Sq. Ft. of Lot / Parcel , 238 ac	
Filing Block Lot		Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed)	
OWNER INFORMATION:		(Total Existing & Proposed) Height of Proposed Structure <i>^ 9 '</i>	
Name Kan	Mostery	DESCRIPTION OF WORK & INTENDED USE:	
Address 3630 Elder Luny Circle		New Single Family Home (*check type below) Interior Remodel Other (please specify):	
City/State/Zip Stand Junctin (d)			
APPLICANT INFORMATION:			ROPOSE <u>D:</u>
Name David Brows		Site Built Manufactured Home (UBC) Manufactured Home (HUD)	
Name David Brring Sam RI, Address <u>3190 W. Tepisan RI</u> ,			
City/State/Zip Summit MS 3966 NOTES:			
Telephone 601-551-7227			
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.			
	TION TO BE COMPLETED BY COMM		
ZONE R-5		Maximum coverage of lot by structures 6676	
SETBACKS: Front 2.5 from property line (PL)		Permanent Foundation Required: YESNO	
Side <u>3</u> from PL Rear <u>5</u> from PL		Parking Requirement	
Maximum Height of Structure(s)35 '		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 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 Det Pure Date S/10/07			
Department Approval Juderh A. Vinc Date _ 8/10/01			
Additional water and/or sewer tap fee(s) are required: YES NO X W/O No. NO CMUNCIE Sur			
Utility Accounting Utility Accounting Utility Accounting Wither			
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)			

٠

