FEE\$	1000
TCP \$	

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

BLDG	PERMIT	NO.

(Single Family Residential and Accessory Structures)

Community Development Department

84052-12657

(Goldenrod: Utility Accounting)

SIF \$	
Building Address 1550 Liepway 50 5	No. of Existing Bldgs No. Proposed
Parcel No. 7945 -233 -14-019	Sq. Ft. of Existing Bldgs Sq. Ft. Proposed
Building Address 1550 / Siefway 50 5 Parcel No. 2945-233-14-019 Subdivision Duffin Prince View	Sq. Ft. of Lot / Parcel
Filing Block Lot	Sq. Ft. Coverage of Lot by Structures & Impervious Surface
OWNER INFORMATION:	(Total Existing & Proposed) Height of Proposed Structure
Name Chales & Duffin	•
Address 1530 Luy 50 #37	DESCRIPTION OF WORK & INTENDED USE: New Single Family Home (*check type below)
Address /330 /400/50 3/	Interior Remodel Addition Other (please specify):
City / State / Zip 81503	Other (prease specify).
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED:
Name Same	Site Built X Manufactured Home (UBC) Manufactured Home (HUD) Other (please specify): C P C D P C C
Address	Other (please specify): <u>REPLACE DIEUOUS</u> NUCL home there.
City / State / ZipNC	OTES:
Telephone 625-2058	
	xisting & proposed structure location(s), parking, setbacks to all
	n & width & all easements & rights-of-way which abut the parcel. MUNITY DEVELOPMENT DEPARTMENT STAFF
$\mathcal{D}\mathcal{V}$	
ZONE	Maximum coverage of lot by structures
SETBACKS: Front from property line (PL)	Permanent Foundation Required: YESNO
Sidefrom PL Rearfrom PL	Parking Requirement
Maximum Height of Structure(s)	Special Conditions Purplar
Voting District Driveway Location Approval(Engineer's Initials)	
	in writing, by the Community Development Department. The intil a final inspection has been completed and a Certificate of partment (Section 305, Uniform Building Code).
	information is correct; I agree to comply with any and all codes, project. I understand that failure to comply shall result in legal in-use of the building(s).
Applicant Signature Charles & Juiffi	Date 7-5-05
Department Approval Wendy Huw	Date 7/5/07
Additional water and/or sewer tap fee(s) are required:	s No X W/O No. No change water su
Utility Accounting	Date 7 -5-07
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (See	

(Pink: Building Department)

