

FEE \$
TCP \$
SIF \$

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

BLDG PERMIT NO. _____

Building Address 465 Orchard
 Parcel No. 2945-113-08-008
 Subdivision _____
 Filing _____ Block _____ Lot _____

No. of Existing Bldgs 1 No. Proposed 1
 Sq. Ft. of Existing Bldgs 1095 Sq. Ft. Proposed 128
 Sq. Ft. of Lot / Parcel 1201 Ac
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____
 Height of Proposed Structure _____

OWNER INFORMATION:

Name Joni Vohs
 Address 465 Orchard Ave
 City / State / Zip El Jct. Co. 81501

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name Same
 Address _____
 City / State / Zip _____
 Telephone 245-9243

***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>R-5</u>	Maximum coverage of lot by structures <u>60%</u>		
SETBACKS; Front <u>20/25</u> from property line (PL)	Permanent Foundation Required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
Side <u>5/3</u> from PL Rear <u>25/5</u> from PL	Parking Requirement _____		
Maximum Height of Structure(s) <u>35</u>	Special Conditions _____		
Voting District _____	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 Joni Vohs Date 6/25/07
 Department Approval Merdy Spurr Date 6/25/07

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No <u>to</u>
Utility Accounting <u>Kate Gebel</u>	Date <u>6/25/07</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)

ACCEPTED Wally Spivey
ANY CHANGE OF SETBACKS MUST BE
APPROVED BY THE CITY PLANNING
DEPT.
RESPONSIBILITY TO PROPERLY
LOCATE AND IDENTIFY EASEMENTS
AND PROPERTY LINES

