

FEE \$	10.00
TCP \$	1589.00
SIF \$	460.00

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. _____

Building Address 2952 Red Cloud Ln No. of Existing Bldgs 0 No. Proposed 1
 Parcel No. 2943-174-43-001 Sq. Ft. of Existing Bldgs 0 Sq. Ft. Proposed 1245
 Subdivision COUNTRY PLACE ESTATES Sq. Ft. of Lot / Parcel 5380 SQ FT
 Filing 1 Block 6 Lot 1 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) 2128 SQ FT
 Height of Proposed Structure 17'

OWNER INFORMATION:

Name CARY RINDENLE CONST
 Address PO BOX 1380
 City / State / Zip CLIFTON CO 81520

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name SAME AS OWNER
 Address _____
 City / State / Zip _____
 Telephone 434-0570

***TYPE OF HOME PROPOSED:**

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

NOTES: NEW SFR

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-8</u>	Maximum coverage of lot by structures <u>70%</u>		
SETBACKS: Front <u>20'</u> from property line (PL)	Permanent Foundation Required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
Side <u>5</u> from PL Rear <u>10</u> from PL	Parking Requirement <u>2</u>		
Maximum Height of Structure(s) <u>35</u>	Special Conditions _____		
Voting District <u>C</u>	Driveway Location Approval <u>PH</u> (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 10-30-07

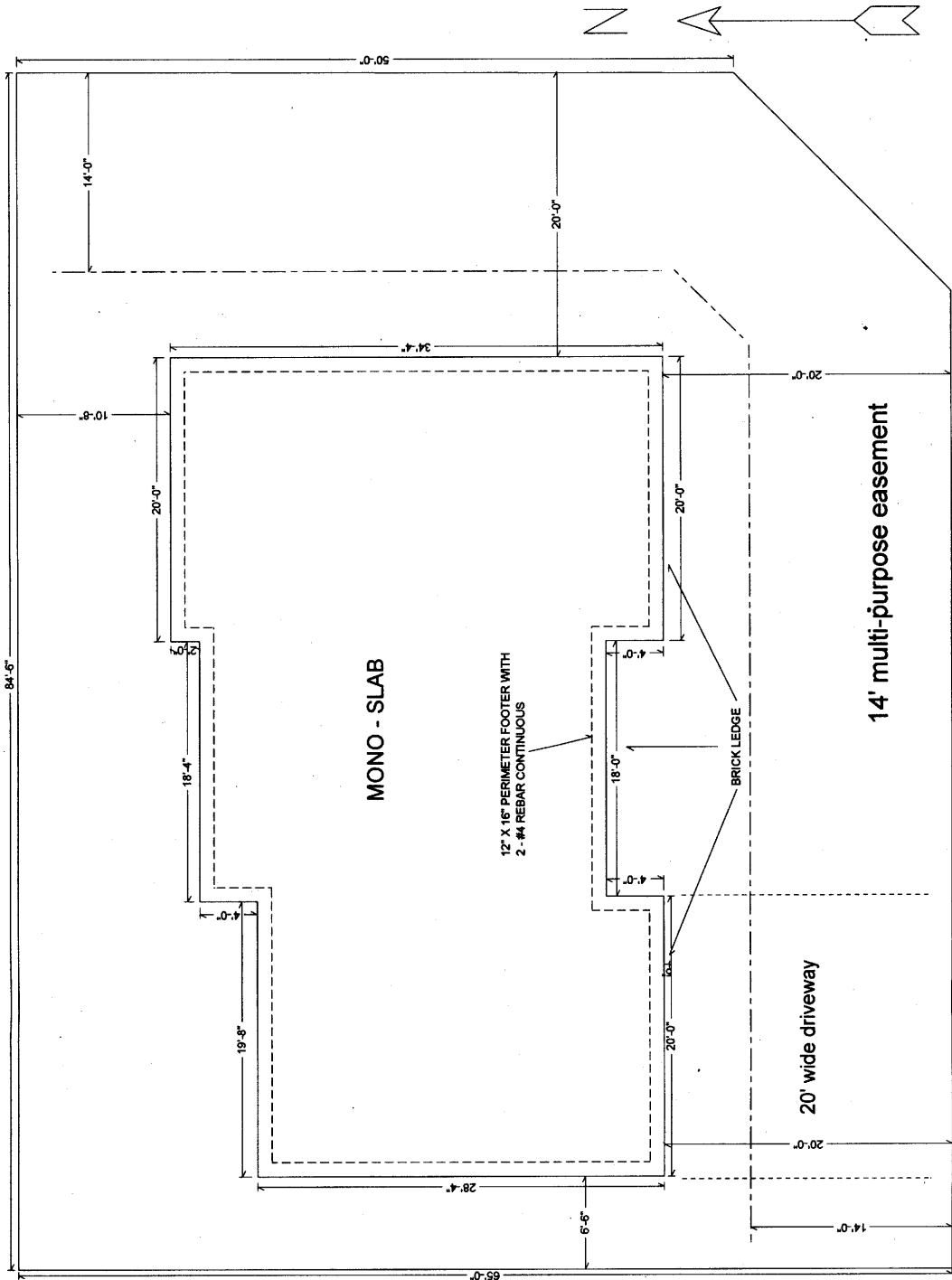
Department Approval [Signature: Paul Hambeck] Date 12/19/07

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>20819</u>
Utility Accounting <u>[Signature]</u>	Date <u>12/19/07</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)

12-19-07

ACCEPTED *JAR Paul Hornbeck*
ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.



*Stamp
Dime*