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FEE \$ 1(). 007 500.00 914 PLANNING CLEA	
FEE \$ 10.007 500 PLANNING CLEA	BLDG PERMIT NO.
TCP \$ 500 (Single Family Residential and A	
SIF \$ $\frac{1}{4}$	nt Department
Building Address 874 Summer Benel. ct	No. of Existing Bldgs No. Proposed
Parcel No. 2701-261-45-013	
Subdivision <u>Sammer hill</u>	Sq. Ft. of Lot / Parcel 5155 Ø
Filing 5 Block 2 Lot 3	Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) 3000 P
OWNER INFORMATION:	Height of Proposed Structure
Name LGD Construction	DESCRIPTION OF WORK & INTENDED USE:
Address ROBOX 1925	New Single Family Home (*check type below)
City / State / Zip <u>CJ- Lo</u>	Other (please specify): <u>Tawn Hom</u> E
APPLICANT INFORMATION:	YPE OF HOME PROPOSED:
Name L6D Construction	Site Built Manufactured Home (UBC) Manufactured Home (HUD)
Address P.O Box 1925	Other (please specify):
City / State / Zip <u>GJ- Co 81502</u>	NOTES:
Telephone 243-6471	
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all e property lines, ingress/egress to the property, driveway location	xisting & proposed structure location(s), parking, setbacks to all n & width & all easements & rights-of-way which abut the parcel.
THIS SECTION TO BE COMPLETED BY COM	MUNITY DEVELOPMENT DEPARTMENT STAFF
ZONE <u>+D</u>	Maximum coverage of lot by structures $50^{\circ}7^{\circ}$
SETBACKS: Front	Permanent Foundation Required: YES <u></u> NO
Side from PL Rear from PL	Parking Requirement
Maximum Height of Structure(s)	Special Conditions SN3 Form Keg
Voting District	See platforfuntion astractions
Modifications to this Planning Clearance must be approved, structure authorized by this application cannot be occupied of Occupancy has been issued, if applicable, by the Building De	in writing, by the Community Development Department. The intil a final inspection has been completed and a Certificate of epartment (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 n-use of the building(s).
Applicant Signature	Date /2.21.06
Department Approvat Hayleen Headerson	Date 1-5-07

Department Approvat / Joylen Neader	ton 1		Da	ate <u> </u>		0-0	
Additional water and/o (sever tap fee(s) are required:	YES	NO		W/O No.	•	10	1914
Utility Accounting			Date	1	/ <	51	07
VALUE FOR SIX MONTHS FROM DATE OF ISSUANCE	= (Section 2 '	$2 \cap 1$	Grand	Lunction	Zon	ind	8 Dovelopment Code)

 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)

