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PLANNING CLEARANCE

BLDG PERMIT NO.

(Single Family Residential and Accessory Structures)

Public Works & Planning Department

SIF\$ 11474-2928	ng beparanen			
Building Address 315 Gunuson	No. of Existing Bldgs		No. Proposed	
Parcel No. 2945-142-27-002	Sq. Ft. of Existing Bl	ldgs	_ Sq. Ft. Proposed	
Subdivision	Sq. Ft. of Lot / Parce	el		
Filing Block Lot	Sq. Ft. Coverage of Lot by Structures & Impervious Surface			
OWNER INFORMATION:	(Total Existing & Proposed) Height of Proposed Structure			
Name John Kurianowicz	_DESCRIPTION OI	F WORK & IN	TENDED USE:	
Address 315 Gunnison	New Single Family Home (*check type below) Interior Remodel Other (please specify): Addition Other (please specify):			
City / State / Zip 6061501	NW WTO	LISWA EX	xist Concrete part	
APPLICANT INFORMATION: Name John Kuranowicz	*TYPE OF HOME PROPOSED: Site Built			
Address 315 Gunnison		pcciry)		
City / State / Zip 60, 60 81501	NOTES:			
Telephone <u>770</u> 618 - 6711				
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all e				
property lines, ingress/egress to the property, driveway location THIS SECTION TO BE COM			or-way writeri abut the parcer.	
zone	Maximum coverag	e of lot by stru	uctures 75%	
SETBACKS: Front from property line (PL)	Permanent Foundation Required: YESNO			
Side from PL Rear from PL	Floodplain Certificate Required: YES NO			
Maximum Height of Structure(s)	Parking Requirement			
Driveway Voting District Location Approval_ (Engineer's Initials	Special Conditions			
Modifications to this Planning Clearance must be approved structure authorized by this application cannot be occupied Occupancy has been issued, if applicable, by the Building D	until a final inspection			
I hereby acknowledge that I have read this application and the ordinances, laws, regulations or restrictions which apply to the action, which may include but not necessarily be limited to n	e project. I understar	nd that failure t		
Applicant Signature Ahr Awarm	Dat	re <u>7/</u>	21/08	
Planning Approval for Denilos	√ Dat	e <u>7/2</u>	1/08	
Additional water and/or sewer tap fee(s) are required: YE	s (NO)	W/O No No	WTILSWIKHONSE	
Utility Accounting	Date			

Grallan Grallan 16" off grown "1" And Congion? 6-1451XJ Acs approved 160 Ac *y9*67