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

BLDG PERMIT NO. _____

80370-7457-

Building Address 520 Pinyon Ave
 Parcel No. 2945-112-07-014
 Subdivision _____
 Filing _____ Block _____ Lot _____

No. of Existing Bldgs 2 No. Proposed 0
 Sq. Ft. of Existing Bldgs _____ Sq. Ft. Proposed _____
 Sq. Ft. of Lot / Parcel _____
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____
 Height of Proposed Structure 15ft

OWNER INFORMATION:

Name Jim Marshall
 Address 520 Pinyon Ave
 City / State / Zip GJ CO 81501

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name ON TRACK BLDG. INC
CARRETT BLECKNA
 Address 965 E. OHLEY AVE
 City / State / Zip Fruita CO 81521
 Telephone 201-1752

*TYPE OF HOME PROPOSED:
 Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): _____

NOTES: Kitchen Addition
NO WTR / CHARGE. OR SUR -

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</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>25</u> from PL	Parking Requirement <u>2</u>
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).

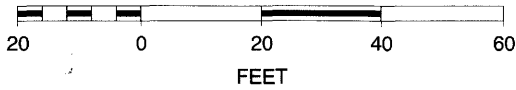
Applicant Signature [Signature] Date 4/5/08
 Department Approval [Signature] Date _____

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No <u>NO WTR / SUR CHARGE</u>
Utility Accounting <u>[Signature]</u>	Date <u>5/5/08</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)



SCALE 1 : 374



15' from side
30' from Front

ACCEPTED PH

ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DIVISION. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.

