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|--------|-------|
| FEE \$ | 10.00 |
| TCP \$ | Ø |
| SIF \$ | Ø |

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

BLDG PERMIT NO. _____

Building Address 411 Rockaway
 Parcel No. 2945-154-27-034
 Subdivision Crowland Sub
 Filing _____ Block _____ Lot _____

No. of Existing Bldgs 2 No. Proposed _____
 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 _____

OWNER INFORMATION:

Name Marian Burns
 Address 411 Rockaway
 City / State / Zip G.S.

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name Floyd & Son Con.
 Address 2031 H3/4
 City / State / Zip Fruita Co 81521
 Telephone 858 8909

***TYPE OF HOME PROPOSED:**

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

NOTES: 8'x45' ^{OPEN} ~~COVERED~~
Can not be enclosed area

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 _____ |
| SETBACKS: Front <u>20'</u> from property line (PL) | Permanent Foundation Required: YES _____ NO _____ |
| Side <u>5'</u> from PL Rear <u>10'</u> from PL | Parking Requirement _____ |
| Maximum Height of Structure(s) _____ | Special Conditions _____ |
| Voting District _____ | <u>Can not be enclosed area</u> |
| Driveway Location Approval _____ (Engineer's Initials) | <u>TB</u> |

PAID

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 4-2-08
 Department Approval [Signature] Date 4-2-08

| | | | |
|--|--------------------|--|---------|
| Additional water and/or sewer tap fee(s) are required: | YES | NO <input checked="" type="checkbox"/> | W/O No. |
| Utility Accounting <u>[Signature]</u> | Date <u>4/2/08</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)

City of Grand Junction GIS Zoning Map ©



ACCEPTED *By Jeffrey Henderson* 4-2-08

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.

RECEIVED

APR 01 2008

COMMUNITY DEVELOPMENT
DEPT.

*8' awning
not enclosed*

