

FEE \$	10
TCP \$	
SIF \$	

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

BLDG PERMIT NO. _____

Building Address 1152 Santa Clara Ave No. of Existing Bldgs _____ No. Proposed _____
 Parcel No. _____ Sq. Ft. of Existing Bldgs _____ Sq. Ft. Proposed _____
 Subdivision Lampite Sq. Ft. of Lot / Parcel _____
 Filing _____ Block _____ Lot _____
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____
 Height of Proposed Structure _____

OWNER INFORMATION:

Name David + Nonnie Hicks
 Address 1152 Santa Clara Ave
 City / State / Zip CS, CO 81503

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name Nonnie Hicks
 Address 1152 Santa Clara
 City / State / Zip CS, CO 81503
 Telephone 970-245-0034

***TYPE OF HOME PROPOSED:**

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

NOTES: _____

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 R-8 Maximum coverage of lot by structures .75%
 SETBACKS: Front 20/25 from property line (PL) Permanent Foundation Required: YES _____ NO _____
 Side 5/3 from PL Rear 10/5 from PL Parking Requirement _____
 Maximum Height of Structure(s) _____ 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 Nonnie Hicks Date 5-16-08
 Department Approval Paul Marshall Date 5/16/08

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>No chg in use</u>
Utility Accounting	<u>Marshall</u>		Date <u>5/16/08</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 : 877



N



ACCEPTED *Paul H. [Signature]*
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.