FEE \$ /0.00 PLANNING CLEA	RANCE BLDG PERMIT NO.			
TCP \$ 0 (Single Family Residential and A	-			
SIF \$ 0 Community Developme				
117378-466472				
Building Address 324 Jalon Dr	No. of Existing Bldgs No. Proposed			
Parcel No. 2945-244-42-014	Sq. Ft. of Existing Bldgs $\frac{1747}{5}$ Sq. Ft. Proposed $\frac{8' \times b'}{5}$ Shud			
Subdivision <u>Eagle</u>	Sq. Ft. of Lot / Parcel			
Filing Block Lot4	Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed)			
OWNER INFORMATION:	Height of Proposed Structure			
Name Dirk + Carla Mayes	DESCRIPTION OF WORK & INTENDED USE:			
Address 324 Talon Dr.	New Single Family Home (*check type below)			
City/State/Zip Grand Unction, C081503				
APPLICANT INFORMATION:	TYPE OF HOME PROPOSED			
Name Dirk Mayes	X Site Built Manufactured Home (UBC) Manufactured Home (HUD)			
Address 325 Talon Dr.	Other (please specify):			
City / State / Zip Grandurction, CD 8150.3	DTES:			
Telephone <u>970-980-9573</u>				
	xisting & proposed structure location(s), parking, setbacks to all			
	on & width & all easements & rights-of-way which abut the parcel.			
	MUNITY DEVELOPMENT DEPARTMENT STAFF			
ZONE <u>RMF-5</u>	Maximum coverage of lot by structures60 ro			
SETBACKS: Front $20 \frac{1}{25}$ from property line (PL)	Permanent Foundation Required: YESNO			
Side $\frac{5^{\prime}/3^{\prime}}{13}$ from PL Rear $\frac{25^{\prime}/5}{15}$ from PL	Parking Requirement			
Maximum Height of Structure(s)	Special Conditions			
Driveway Voting District Location Approval				
(Engineer's Initials)				
	in writing, by the Community Development Department. The until a final inspection has been completed and a Certificate of epartment (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	~		Da	ate	
Department Approval Bayles	. Henderso		Da	ate 2-31-08	
Additional water and/or sewer tap fe	e(s) are required:	YES	NO	W/O NO. NOWTE	Iswa Change
Utility Accounting			Date	n 1	
VALID EOR_SIX MENTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning & Development Code) (White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)					

