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SIF \$	

## **PLANNING CLEARANCE**

(Single Family Residential and Accessory Structures)

Public Works & Planning Department

BLDG	PERMI	T NO.

8376

	A Hackeda
Building Address 107 Hillcrest	No. of Existing Bldgs No. Proposed
Parcel No. 2945 - 112 - 15 - 012	Sq. Ft. of Existing Bldgs Sq. Ft. Proposed 7924 Sq. Ft. of Lot / Parcel 36 Acres
Subdivision Hallerest Madon	Sq. Ft. of Lot / Parcel ARRAY 36 Acre
Filing Block Lot	Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed)
OWNER INFORMATION:	Height of Proposed Structure 17 ft. Wdr. Venu
Name Todd; Angely Hegstron	DESCRIPTION OF WORK & INTENDED USE:
Address 115 Hucrest	New Single Family Home (*check type below) Interior Remodel  Addition
City / State / Zip 6 5ct. Co 81501	Y Other (please specify): garage + mu & room
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED:
Name BENCHMARK CM LIC	✓ Site Built
Address 1959 Broadway	Other (please specify):
City/State/Zip GRANG 5d. 6815	NOTES: tollet & Shower to be added
Telephone <u>970-250-7700</u>	interrudición legu.
	isting & proposed structure location(s), parking, setbacks to all a width & all easements & rights-of-way which abut the parcel.
THIS SECTION TO BE COMPI	LETED BY PLANNING STAFF
zone <u><u></u> <u><u></u> <u><u></u> <u><u></u> <u><u> </u> <u> </u></u></u></u></u></u>	Maximum coverage of lot by structures
SETBACKS: Front 20 from property line (PL)	Permanent Foundation Required: YESNO
	Floodplain Certificate Required: YESNOX
Maximum Height of Structure(s)	Parking Requirement
Voting District	Special Conditions
Modifications to this Planning Clearance must be approved, structure authorized by this application cannot be occupied ur Occupancy has been issued, if applicable, by the Building Dep	ntil a final inspection has been completed and a Certificate of
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 nor	project. I understand that failure to comply shall result in legal
Applicant Signature	&Date
Planning Approval Pat Olinlas	Date
Additional water and/or sewer tap fee(s) are required: YES	NO W/O No.
Utility Accounting Our PS	Date \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

