FEE\$	10
TCP\$	
SIF\$	

## **PLANNING CLEARANCE**

BLDG PERMIT NO.

(Single Family Residential and Accessory Structures) **Public Works & Planning Department** 

12346-0

	•
Building Address 25/W PARKVIEW DR	No. of Existing Bldgs 3 No. Proposed 10 Ch
Parcel No. 2945-252-18-019	Sq. Ft. of Existing Bldgs 1725 Sq. Ft. Proposed 410 dag
Subdivision PARKVIEW	Sq. Ft. of Lot / Parcel 9278
Filing Block Lot	Sq. Ft. Coverage of Lot by Structures & Impervious Surface
OWNER INFORMATION:	Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed)/ 725 + 468 de reading-
Name Amunda Gardner Address 251 W Parkinculor City/State/Zip 65 (0.81503)	DESCRIPTION OF WORK & INTENDED USE:  New Single Family Home (*check type below)  Interior Remodel  Other (please specify): englose existing carport  With Succession was a company of the
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED: & plum budy
Name Amanda Eardner	Site Built Manufactured Home (UBC) Manufactured Home (HUD) Other (please specify):
Address 25 W Parkville Dr	
City / State / Zip (2) (0) X1503	NOTES:
Telephone <u>970</u> 354 2993	
	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	
ZONE	Maximum coverage of lot by structures
SETBACKS: Front 20 from property line (PL)	Permanent Foundation Required: YES_XNO
Side from PL Rear/O from PL	Floodplain Certificate Required: YESNO
Maximum Height of Structure(s)35	Parking Requirement
Voting District Driveway Location Approval_ (Engineer's Initials)	Special Conditions
	in writing, by the Public Works & Planning Department. The ntil a final inspection has been completed and a Certificate of partment.
I hereby acknowledge that I have read this application and the i 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 12 28 109
Planning Approval CMClee	Date
Additional water and/or sewer tap fee(s) are required: YES	NOI W/O No. Wo (hay mu
Utility Accounting	Date   Q 28   09