

FEE \$	10.00
TCP \$	4
SIF \$	4

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

BLDG PERMIT NO. 9855-0

Building Address 1920 Clover Ct.
 Parcel No. 2945-014-10-019
 Subdivision Spring Valley
 Filing No. 3 Block 3 Lot 19

No. of Existing Bldgs 2 No. Proposed 0
 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 Larry and Kathleen Neale
 Address 1920 Clover Ct.
 City / State / Grand Jct. Co. 81506

DESCRIPTION OF WORK & INTENDED USE:

New Single Family Home (*check type below)
 Interior Remodel Addition covered
 Other (please specify): 12' x 23' deck

APPLICANT INFORMATION:

Name Larry and Kathleen Neale
 Address 1920 Clover Ct.
 City / State / Grand Jct. Co 81506
 Telephone 970-254-1021

***TYPE OF HOME PROPOSED:**

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

NOTES: cover extend deck.
Put on Pergola

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 PLANNING STAFF	
ZONE <u>R-5</u>	Maximum coverage of lot by structures <u>60%</u>
SETBACKS: Front <u>20'</u> from property line (PL)	Permanent Foundation Required: YES _____ NO <u>✓</u>
Side <u>5'</u> from PL Rear <u>25'</u> from PL	Floodplain Certificate Required: YES _____ NO <u>✓</u>
Maximum Height of Structure(s) <u>40</u>	Parking Requirement _____
Voting District _____ Driveway Location Approval _____	Special Conditions _____
(Engineer's Initials)	

Modifications to this Planning Clearance must be approved, in writing, by the Public Works & Planning 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.

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 Larry Neale Date 5-25-10
 Planning Approval Dayleen Henderson Date 5-25-10

MAY 25 2010

Additional water and/or sewer tap fee(s) are required:	YES	NO <u>X</u>	W/O No. <u>no sewer/water</u>
Utility Accounting <u>Done</u>	Date <u>5/25/10</u>		

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 21.02.070(b) Grand Junction Municipal Code)
 (White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

City of Grand Junction GIS Zoning Map ©



5-25-10

ACCEPTED *Gayle Henderson*

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.