| FEE \$ 5   | PLANNIN                                | BLDG PERMIT NO.                 |  |      |  |  |  |
|--|--|---------------------------------|--|------|--|--|--|
| TCP \$   | (Single Family Resider                 | ntial and Accessory Structure   | s)   |      |  |  |  |
| SIF \$   | <u>Public Wor</u>                      | ks & Planning Department        | $\frac{\text{tment}}{2}$ $93f \mathcal{F}^{-0}$  |      |  |  |  |
| Building Address 712   | Turn has been                          | No. of Existing Bldgs           | No. Proposed   |      |  |  |  |
| Building Address 712 Tranhoe Way<br>Parcel No. 2701-353-13-019 |  | Sq. Ft. of Existing Bldgs       | Sq. Ft. Proposed   |      |  |  |  |
| Subdivision  |  | Sq. Ft. of Lot / Parcel         | Sq. Ft. of Lot / Parcel  |      |  |  |  |
| Filing Block Lot   |  | Sq. Ft. Coverage of Lot         | Sq. Ft. Coverage of Lot by Structures & Impervious Surface                               |      |  |  |  |
|  | ······································ | (Total Existing & Propos        | ed)  |      |  |  |  |
| OWNER INFORMATION:   |  | Height of Proposed Strue        | clure  | 11   |  |  |  |
| Name <u>Bill Schu</u>  | muti                                   | DESCRIPTION OF W                | ORK & INTENDED USE:  |      |  |  |  |
|  |  | New Single Family               | Home (*check type below)   |      |  |  |  |
| Address 712 Irenh  | e Way                                  |                                 | ify): <u>prenter our</u>   |      |  |  |  |
| City/State/ Grand Sunction Co 81506                            |  | oe BAH                          | BAthroom   |      |  |  |  |
| APPLICANT INFORMATION:   |  |                                 | TYPE OF HOME PROPOSED:   |      |  |  |  |
| Name Faith Constru   | <i>iction</i>                          | Site Built<br>Manufactured Hom  | Site Built Manufactured Home (UBC)<br>Manufactured Home (HUD)<br>Other (please specify): |      |  |  |  |
| Address 504 28 2   | Read                                   |                                 | liy)   |      |  |  |  |
| City / State / Crand Jac                                       |  | <b>`</b>                        | A into mosta but   | hrun |  |  |  |
| Telephone 970-241-   | 3214                                   |                                 |  |      |  |  |  |
|  |  |                                 | ure location(s), parking, setbacks to<br>& rights-of-way which abut the parc             |      |  |  |  |
|  |  | OMPLETED BY PLANNING            |  |      |  |  |  |
| ZONE R-4   |  | Maximum coverage of             | f lot by ștructures  |      |  |  |  |
| SETBACKS: Front  | from property line (PL                 | ) Permanent Foundatio           | n Required: YES NO   |      |  |  |  |
| Side from PL F   | Rear from PL                           | Floodplain Certificate          | Required: YESNO  |      |  |  |  |
| Maximum Height of Structure(s                                  | )                                      | Parking Requirement             |  |      |  |  |  |
|  | eway<br>ation Approval                 | Special Conditions              |  | _    |  |  |  |
| Modifications to this Planning (                               | (Engineer's                            |                                 | Works & Planning Department. The   |      |  |  |  |
|  | plication cannot be occupi             | ed until a final inspection has | been completed and a Certificate   |      |  |  |  |
|  | r restrictions which apply to          | o the project. I understand the | gree to comply with any and all code<br>at failure to comply shall result in leg         |      |  |  |  |
| Applicant Signature <u>Cordia</u>                              | Um                                     | Date                            | 8-31-19  |      |  |  |  |
| Planning Approval  | in Raywelds                            | Date                            | 8/31/10  |      |  |  |  |
| Additional water and/or sewer t                                | ap fee(s) are required:                | YES NO W/O                      | No. wowen hely   |      |  |  |  |

| Additional water and/or                  | sewer tap fee(s) are required               | d: YES | NO WON  | 10. No serve | Incly                       |
|--|---|--------|---|--------------|-----------------------------|
| Utility Accounting                       | $\Omega c$                                  | ''     | Date 8  | 1311/10      |                             |
| VALID FOR SIX MONTI<br>(White: Planning) | HS FROM DATE OF ISSUA<br>(Yellow: Customer) |        | 21.02.070(b) Grand .<br><i>ing Department</i> ) | -            | Code)<br>(ility Accounting) |