

FEE \$	10.00
TCP \$	✓
SIF \$	✓

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

BLDG PERMIT NO. _____

Building Address 605 Meander Dr.
 Parcel No. 2945-034-33-001
 Subdivision Tomkins
 Filing _____ Block _____ Lot _____

No. of Existing Bldgs 1 No. of Proposed 1
 Sq. Ft. of Existing Bldgs 2582 Sq. Ft. Proposed 144
 Sq. Ft. of Lot / Parcel .9
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____
 Height of Proposed Structure _____

OWNER INFORMATION:

Name Kari & Todd Mitchell
 Address 605 Meander Dr.
 City / State / Zip CO CO 81505

DESCRIPTION OF WORK & INTENDED USE:
 New Single Family Home (*check type below)
 Interior Remodel Addition
 Other (please specify): Magola 6'x6'

APPLICANT INFORMATION:

Name same
 Address _____
 City / State / Zip _____
 Telephone 970 4243 8772

*TYPE OF HOME PROPOSED:
 Site Built Manufactured Home (UBC)
 Manufactured Home (HUD)
 Other (please specify): _____

NOTES: _____

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>R4</u>	Maximum coverage of lot by structures <u>50%</u>	
SETBACKS: Front <u>25'</u> from property line (PL)	Permanent Foundation Required: YES _____ NO _____	
Side <u>3'</u> from PL Rear <u>5'</u> from PL	Floodplain Certificate Required: YES _____ NO _____	
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 Kari Mitchell Date 4/9/10
 Planning Approval Daylan Henderson Date 4-9-10

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No.
Utility Accounting <u>LeBensley</u>	Date <u>4/9/10</u>		

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.4 Grand Junction Zoning & Development Code)
 (White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

