·	PONSO	054603		
FEE \$	PLANNING CLEARANCE		BLDG PERMIT NO.	
TCP\$ 2 554	(Single Family Residential a	and Accessory Structures)	PCR-2010-425	
SIF\$ 460	Public Works &	Planning Department	Recpt 35948	
1			1	
Building Address 2808		No. of Existing Bldgs (No. Proposed	
Parcel No. <u>7943 - D</u>		Sq. Ft. of Existing Bldgs	Sq. Ft. Proposed	
Subdivision Reducion	d Harplits	Sq. Ft. of Lot / Parcel	·	
Filing Block	$_$ Lot $\underline{34}$		ructures & Impervious Surface	
		(Total Existing & Proposed)	1661	
OWNER INFORMATION:	l(r) l	Height of Proposed Structure		
Name Rickenson H.	21/15 Lovel of how T		-	
Address SPS A R	is branche Pr.	New Single Family Hom	Addition	
/ /	Juntin. CO 81501	Other (please specify):	·	
City/State/	· · · · · · · · · · · · · · · · · · ·			
	$(1, \overline{O}, 1)$ $(M\overline{O}, \cdot)$	*TYPE OF HOME PROPO	SED: Manufactured Home (UBC)	
Name Lidgenical Hog	WS IW. Jet Iluis	Manufactured Home (H		
Address 5881 R	à brande DC	Other (please specify):		
City / State / /2. J	(850/	NOTES:		
	1117			
Telephone 770-21	6-9786 *E			
	n 8 1/2" x 11" paper, showing all ex s to the property, driveway location			
property lines, ligress/egres	THIS SECTION TO BE COMF			
ZONE R& CHUSTER	1) conney is R-5	Maximum coverage of lot l	by structures 70	
SETBACKS: Front	from property line (PL)	Permanent Foundation Re	equired: YES NO	
Side \leq from PL	Rear IO from PL	Floodplain Certificate Requ	uired: YES NO	
Maximum Height of Structu		Parking Requirement	2	
	Driveway	Special Conditions	· · · · · · · · · · · · · · · · · · ·	
	ocation Approval (Engineer's Initial	·		
	ng Clearance must be approved, application cannot be occupied u			
	d, if applicable, by the Building De		en completed and a Certificate of	
I hereby acknowledge that k	bave read this application and the	nformation is correct; I agree	to comply with any and all codes,	
ordinances, laws, regulation	s or restrictions which apply to the	project. I understand that fai		
ϵ			-6-10	
Applicant Signature		Date(
Planning Approval	Jula Kaynels	<u> Date // / 2</u>	0/10	
Additional water and/or sew	er tap fee(s) are required:	NO W/O No.	21797	
Utility Accounting	Xilahot	Date	-10	
	NOM DATE OF ISSUANCE (Sec			
(White: Planning) (Yellow: Customer) (Pink:	Building Department)	(Goldenrod: Utility Accounting)	

•	0			
	cK	#/	'5	74

