

FEE \$	45.00
TCP \$	NA
SIF \$	NA



BLDG PERMIT NO. 68430

(Handwritten mark)

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)
Community Development Department

BLDG ADDRESS 682 W. Gunnison TAX SCHEDULE NO. 2945-151-11-022
 SUBDIVISION 6450 West Sub. SQ. FT. OF PROPOSED BLDG(S)/ADDITION 0
 FILING 2 BLK 5 LOT 11-12-13 SQ. FT. OF EXISTING BLDG(S) 16,500[#]
 (1) OWNER Kaloha Inc NO. OF DWELLING UNITS
 BEFORE: 0 AFTER: 0 THIS CONSTRUCTION
 (1) ADDRESS 682 West Gunnison
 NO. OF BLDGS ON PARCEL
 BEFORE: 1 AFTER: 1 THIS CONSTRUCTION
 (1) TELEPHONE 970-242-6899
 USE OF EXISTING BLDGS Manufacturing
 (2) APPLICANT Randy Taylor DESCRIPTION OF WORK AND INTENDED USE: Increase
offices, Relocate paint Boethes
 (2) ADDRESS 712 24 3/4 Rd.
 (2) TELEPHONE 970-242-3991

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 COMMUNITY DEVELOPMENT DEPARTMENT STAFF

ZONE C-1 Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL) Parking Req'mt _____
 or _____ from center of ROW, whichever is greater
 Side _____ from PL Rear Interior remodel from PL Special Conditions _____
 Maximum Height _____
 CENSUS 9 TRAFFIC 11 ANN# _____

Modifications to this Planning Clearance must be approved, in writing, by the Director of the Community Development 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 by the Building Department (Section 305, Uniform Building Code).

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 Randy Taylor Date 1-13-99
 Department Approval Walter J. Wilbert 1/13/99 Date 1/13/99

Additional water and/or sewer tap fee(s) are required: YES NO W/O No. _____
 Utility Accounting Debi Overholt Date 1-13-99

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2C Grand Junction Zoning & Development Code)

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)