

Planning \$ <u>5.00</u>	Drainage \$ <u> </u>
TCP \$ <u> </u>	School Impact \$ <u> </u>

BLDG PERMIT NO. <u>75021</u>
FILE # <u> </u>

PLANNING CLEARANCE
(multifamily and non-residential remodels and change of use)
Grand Junction Community Development Department

THIS SECTION TO BE COMPLETED BY APPLICANT

BUILDING ADDRESS 454 Main St

SUBDIVISION

FILING BLK LOT

OWNER Charles F Raley

ADDRESS 313-31 3/4 Rd, 81503

TELEPHONE 523-9298

APPLICANT Merritt Const.

ADDRESS

TELEPHONE 241-5104

TAX SCHEDULE NO. 2945-143-16-016

CURRENT FAIR MARKET VALUE OF STRUCTURE \$ 175,380

ESTIMATED REMODELING COST \$ 7,500

NO. OF DWELLING UNITS: BEFORE 1 AFTER 1
CONSTRUCTION

USE OF ALL EXISTING BLDGS Office / Retail

DESCRIPTION OF WORK & INTENDED USE: Interior finish

Submittal requirements are outlined in the SSID (Submittal Standards for Improvements and Development) document.

THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF

ZONE B-2 SPECIAL CONDITIONS:

PARKING REQUIREMENT:

LANDSCAPING/SCREENING REQUIRED: YES NO

CENSUS TRACT 3 TRAFFIC ZONE 300 ANNEX

Modifications to this Planning Clearance must be approved, in writing, by the Community Development Department Director. 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 307, Uniform Building Code). Required improvements in the public right-of-way must be guaranteed prior to issuance of a Planning Clearance. All other required site improvements must be completed or guaranteed prior to issuance of a Certificate of Occupancy. Any landscaping required by this permit shall be maintained in an acceptable and healthy condition. The replacement of any vegetation materials that die or are in an unhealthy condition is required by the Grand Junction Zoning and Development 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 that 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's Signature [Signature] Date 5-2-00

Department Approval [Signature] Date 5/2/00

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u> </u>
Utility Accounting <u>[Signature]</u>			Date <u>5/2/00</u>

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

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

Planning \$ <u>2.00</u>	Drainage \$ _____
TCP \$ _____	School Impact \$ _____

BLDG PERMIT NO. _____
FILE # _____

PLANNING CLEARANCE
 (multifamily and non-residential remodels and change of use)
Grand Junction Community Development Department

THIS SECTION TO BE COMPLETED BY APPLICANT

BUILDING ADDRESS <u>454 MAIN ST</u>	TAX SCHEDULE NO. <u>2945-143-16-016</u>
SUBDIVISION _____	CURRENT FAIR MARKET VALUE OF STRUCTURE \$ <u>175,300</u>
FILING _____ BLK _____ LOT _____	ESTIMATED REMODELING COST \$ <u>7,500</u>
OWNER <u>CHARLES F RALEY</u>	NO. OF DWELLING UNITS: BEFORE <u>1</u> AFTER <u>1</u>
ADDRESS <u>313-31 3/4 Rd, 81503</u>	CONSTRUCTION _____
TELEPHONE <u>523-9298</u>	USE OF ALL EXISTING BLDGS <u>Office / Retail</u>
APPLICANT <u>Merritt Const.</u>	DESCRIPTION OF WORK & INTENDED USE: <u>Interior</u>
ADDRESS _____	<u>finish</u>
TELEPHONE <u>241 5164</u>	_____

Submittal requirements are outlined in the SSID (Submittal Standards for Improvements and Development) document.

THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF

ZONE <u>B-2</u>	SPECIAL CONDITIONS: _____
PARKING REQUIREMENT: _____	_____
LANDSCAPING/SCREENING REQUIRED: YES _____ NO <input checked="" type="checkbox"/>	CENSUS TRACT <u>3</u> TRAFFIC ZONE <u>3e</u> ANNEX _____

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Department Approval <u>[Signature]</u>	Date <u>5/2/00</u>

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No.
Utility Accounting			Date

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