


| | |
|--------|--------------------|
| FEE \$ | 10.00 0 |
| TCP \$ | 0 |
| SIF \$ | 0 |

PLANNING CLEARANCE
 (Single Family Residential and Accessory Structures)
Community Development Department

BLDG PERMIT NO. 83931
 EP-2002-0107



Your Bridge to a Better Community

69791-1231

BLDG ADDRESS 429 Chau Luota SQ. FT. OF PROPOSED BLDGS/ADDITION 1300 sq. ft

TAX SCHEDULE NO. 2945-154-26-004 SQ. FT. OF EXISTING BLDGS 0

SUBDIVISION Crawford Sub Area TOTAL SQ. FT. OF EXISTING & PROPOSED 1300

FILING S16 BLK 4 LOT 18 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER Leonard Kunkle & Denise Burigen NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS 2907 Kanel Ct USE OF EXISTING BUILDINGS None

(1) TELEPHONE 255-9803 234-0753 DESCRIPTION OF WORK & INTENDED USE Dwelling

(2) APPLICANT Same TYPE OF HOME PROPOSED:

(2) ADDRESS _____ Site Built _____ Manufactured Home (UBC)
 _____ Manufactured Home (HUD)
 (2) TELEPHONE _____ Other (please specify) _____

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 RMF-8

Maximum coverage of lot by structures 70%

SETBACKS: Front 20' from property line (PL)
 or _____ from center of ROW, whichever is greater

Permanent Foundation Required: YES NO _____

Side 5' from PL, Rear 10' from PL

Parking Req'mt 2

Maximum Height 35'

Special Conditions 100 yr floodplain

CENSUS _____ TRAFFIC _____ ANNEX# _____

Modifications to this Planning Clearance must be approved, in writing, by 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, if applicable, 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 Leonard Kunkle Date _____
 Department Approval Denise Burigen Date 4/18/02
Denise Burigen

| | | | |
|--|---------------------|-------------------------------------|---------|
| Additional water and/or sewer tap fee(s) are required: | YES | <input checked="" type="radio"/> NO | W/O No. |
| Utility Accounting <u>Pamela Adams</u> | Date <u>4-18-02</u> | | |

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)

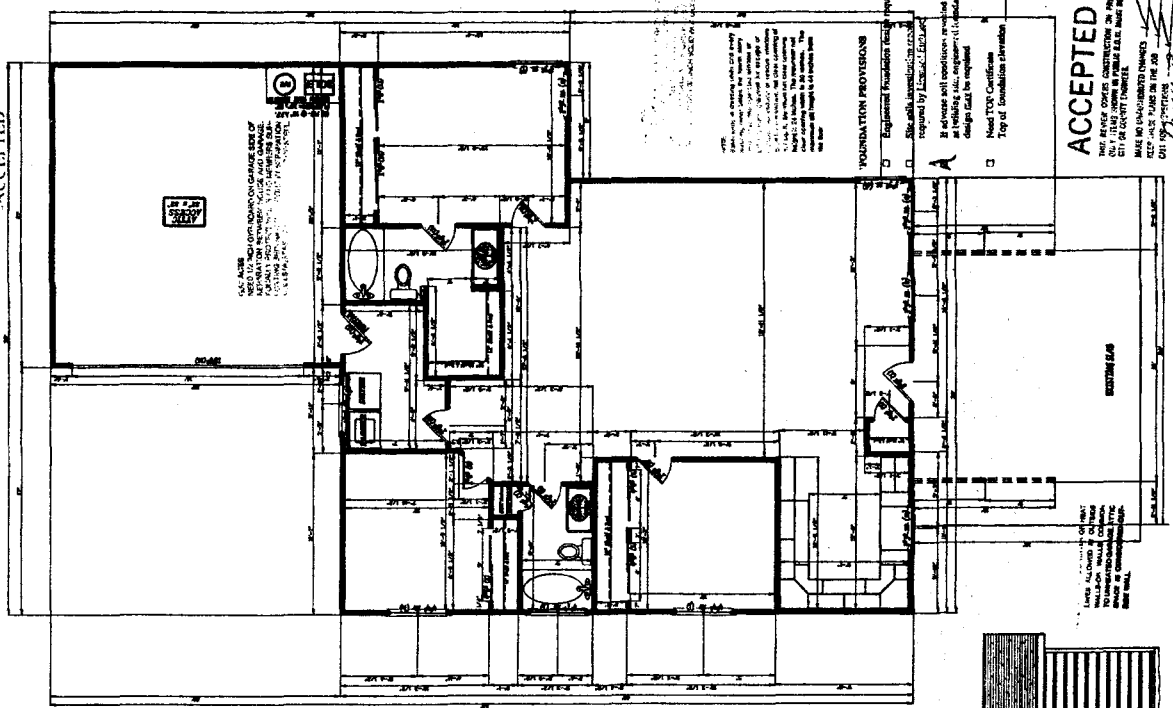
DRAWING NO. 12-2-1
 DRAWING TITLE: FOUNDATION
 DATE: 10/15/77
 FILE NUMBER: 100-100-100
 PROJECT: 100-100-100
 1977 / 1977

DRAFTED / DESIGNED BY: STECKMAN DESIGN
 SPECIALIZED HOME DESIGNERS
 1100 FOREST HILLS, SUITE 100, ST. LOUIS, MO. 63114
 PHONE (314) 862-0070 FAX (314) 862-0071

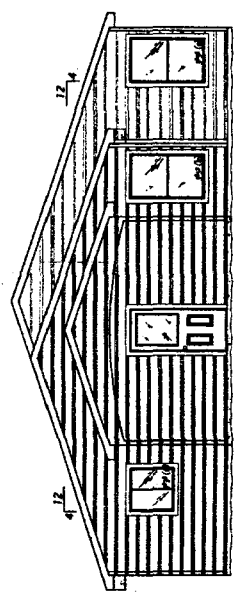
429 Chulavita Ave.
 Grand Junction, Co.

SHEET 2
 OF 2

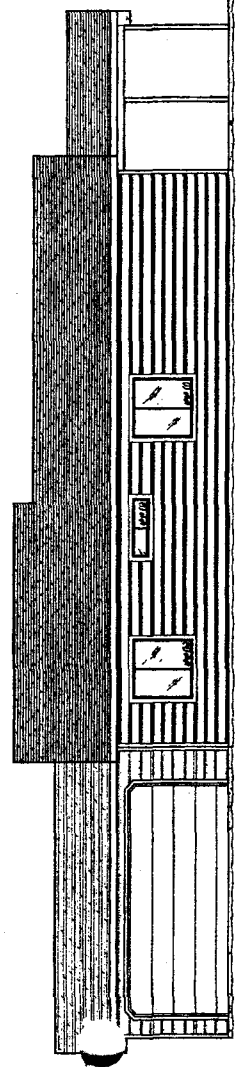
BUILDING DEPT.
 ACCEPTED



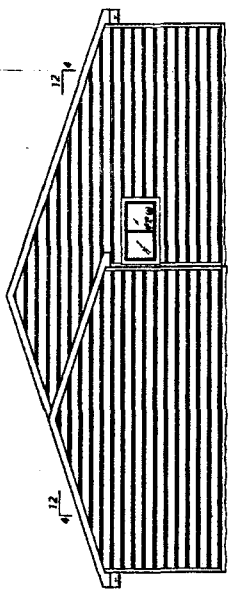
FLOOR PLAN
 SCALE: 1/4" = 1'-0"



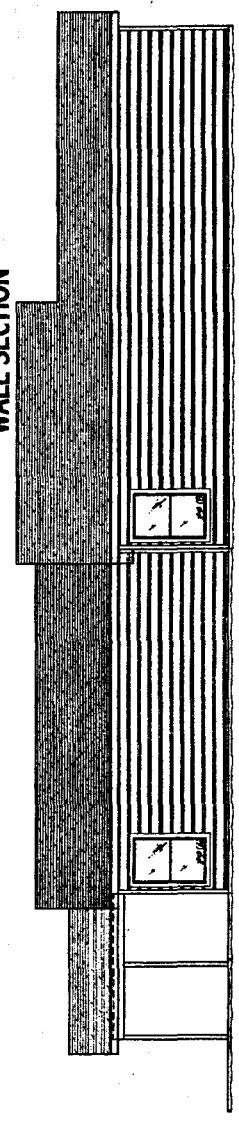
LEFT ELEVATION
 SCALE: 1/4" = 1'-0"



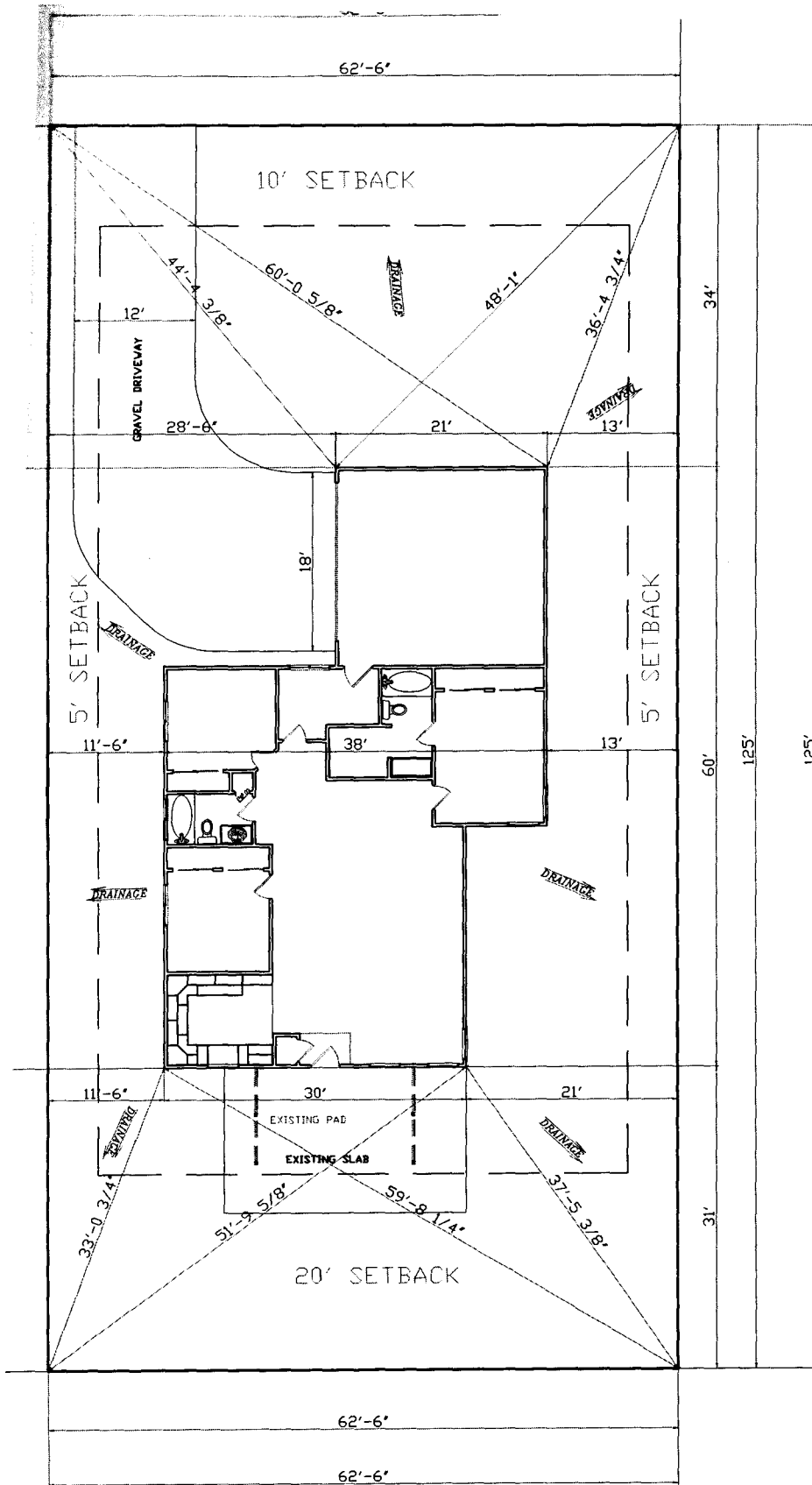
LEFT ELEVATION
 SCALE: 1/4" = 1'-0"



LEFT ELEVATION
 SCALE: 1/4" = 1'-0"



LEFT ELEVATION
 SCALE: 1/4" = 1'-0"



4/19/07
 ACCEPTED C. Faye Wilson
 ANY CHANGE OF SETBACKS MUST BE
 APPROVED BY THE CITY PLANNING
 DEPARTMENT. THE APPLICANT'S
 RESPONSIBILITY TO PROPERLY
 LOCATE AND IDENTIFY EASEMENTS
 AND PROPERTY LINES

429 Chuluota Ave.

SET BACKS

- FRONT - 20'
- REAR - 10'- Access. Dwelling -5'
- R SIDE - 5' - Access. Dwelling -3'
- L SIDE - 5' - Access. Dwelling -3'

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

| | | |
|--|--|--|
| BUILDING OWNER'S NAME <i>Leonard L. Kunkle and Denise E. Bunniger</i> | | For Insurance Company Use: Policy Number |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <i>429 Chululota Ave.</i> | | Company NAIC Number |
| CITY <i>Grand Jet.</i> | STATE <i>Co.</i> | ZIP CODE <i>81501</i> |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <i>Lot 16 and 17 and the 1/2 Lot 18 Blk 4 Joseph AK Crawford and Thomas B. Crawford Sab.</i> | | |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <i>Residential</i> | | |
| LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -###" or ##.#####) | HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 | SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: |

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

| | | | | | |
|--|------------|---|---|--------------------------------|---|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <i>City of Grand Junction 08017-0005</i> | | B2. COUNTY NAME <i>Mesa</i> | | B3. STATE <i>Co</i> | |
| B4. MAP AND PANEL NUMBER <i>08017-0006 E</i> | B5. SUFFIX | B6. FIRM INDEX DATE <i>July 15, 1992</i> | B7. FIRM PANEL EFFECTIVE/REVISED DATE <i>July 15, 1992</i> | B8. FLOOD ZONE(S) <i>AE</i> | B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <i>4556.5</i> |

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe):

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

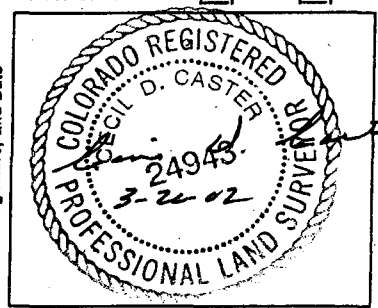
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, (AE) AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
Complete Items C3.a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum NAVD 1988 Conversion/Comments

Elevation reference mark used 4556.5 Does the elevation reference mark used appear on the FIRM? Yes No

| | |
|--|------------------------|
| <input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure) | <u>4557.5</u> ft.(m) |
| <input type="checkbox"/> b) Top of next higher floor | _____ ft.(m) |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) | _____ ft.(m) |
| <input type="checkbox"/> d) Attached garage (top of slab) | _____ ft.(m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) | _____ ft.(m) |
| <input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG) | _____ ft.(m) |
| <input type="checkbox"/> g) Highest adjacent (finished) grade (HAG) | _____ ft.(m) |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade | _____ |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h | _____ sq. in. (sq. cm) |



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME Cecil D. Caster LICENSE NUMBER PLS 24943

TITLE Owner COMPANY NAME Monument Surveying

ADDRESS 741 Road Ave CITY Grand Jet. STATE Co ZIP CODE 81501

SIGNATURE Leonard L. Kunkle DATE 3-19-02 TELEPHONE 970-245-4189

| | | | | |
|--|-------------|-------------------|-----------------------------------|--|
| IMPORTANT: In these spaces, copy the corresponding information from Section A. | | | For Insurance Company Use: | |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 429 Chulata Ave | | | Policy Number | |
| CITY Grand Jet. | STATE G. | ZIP CODE 81501 | Company NAIC Number | |

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS *Elev's shown on this date (3-19-02) are for design or construction purposes. It is recommended to perform be checked before pouring foundation and after to insure proper elevations.*

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1. through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number _____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is _____ ft.(m) _____ in.(cm) _____ above or _____ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is _____ ft.(m) _____ in.(cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.
- E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

| | | | |
|-----------|------|-----------|----------|
| ADDRESS | CITY | STATE | ZIP CODE |
| SIGNATURE | DATE | TELEPHONE | |

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

| | | |
|-------------------|------------------------|---|
| G4. PERMIT NUMBER | G5. DATE PERMIT ISSUED | G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED |
|-------------------|------------------------|---|

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

| | |
|-----------------------|-----------|
| LOCAL OFFICIAL'S NAME | TITLE |
| COMMUNITY NAME | TELEPHONE |
| SIGNATURE | DATE |

COMMENTS

Check here if attachments