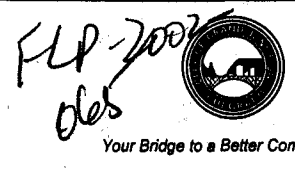


FLP-2002-065

BLDG PERMIT NO. 8446

FEE \$	500.00
TCP \$	500.00
SIF \$	0

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



BLDG ADDRESS 833 W. MAIN SQ. FT. OF PROPOSED BLDGS/ADDITION 840

TAX SCHEDULE NO. 2945-154-18-016 SQ. FT. OF EXISTING BLDGS -0-

SUBDIVISION GRAND RIVER TOTAL SQ. FT. OF EXISTING & PROPOSED 840

FILING 1 BLK 1 LOT 14 NO. OF DWELLING UNITS:
 Before: 0 After: 1 this Construction

(1) OWNER HENRY G. DRAKE NO. OF BUILDINGS ON PARCEL
 Before: 0 After: 1 this Construction

(1) ADDRESS 555 BLUFF CT. USE OF EXISTING BUILDINGS N/A

(1) TELEPHONE 242-4190 DESCRIPTION OF WORK & INTENDED USE INSTALL SINGLE FAMILY RES.

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

(2) ADDRESS SAME

(2) TELEPHONE _____

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) Permanent Foundation Required: YES NO _____
 or _____ from center of ROW, whichever is greater

Side 5' from PL, Rear 10' from PL Parking Req'mt 2

Maximum Height 35' Special Conditions Hud approved #

CENSUS 9 TRAFFIC 101 ANN# _____

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 Henry G. Drake Date 2-5-02

Department Approval Bonnie Edwards Date 2-4-02

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO _____	W/O No. <u>732</u>
Utility Accounting <u>Bob Overholt</u>	Date <u>4/5/02</u>		

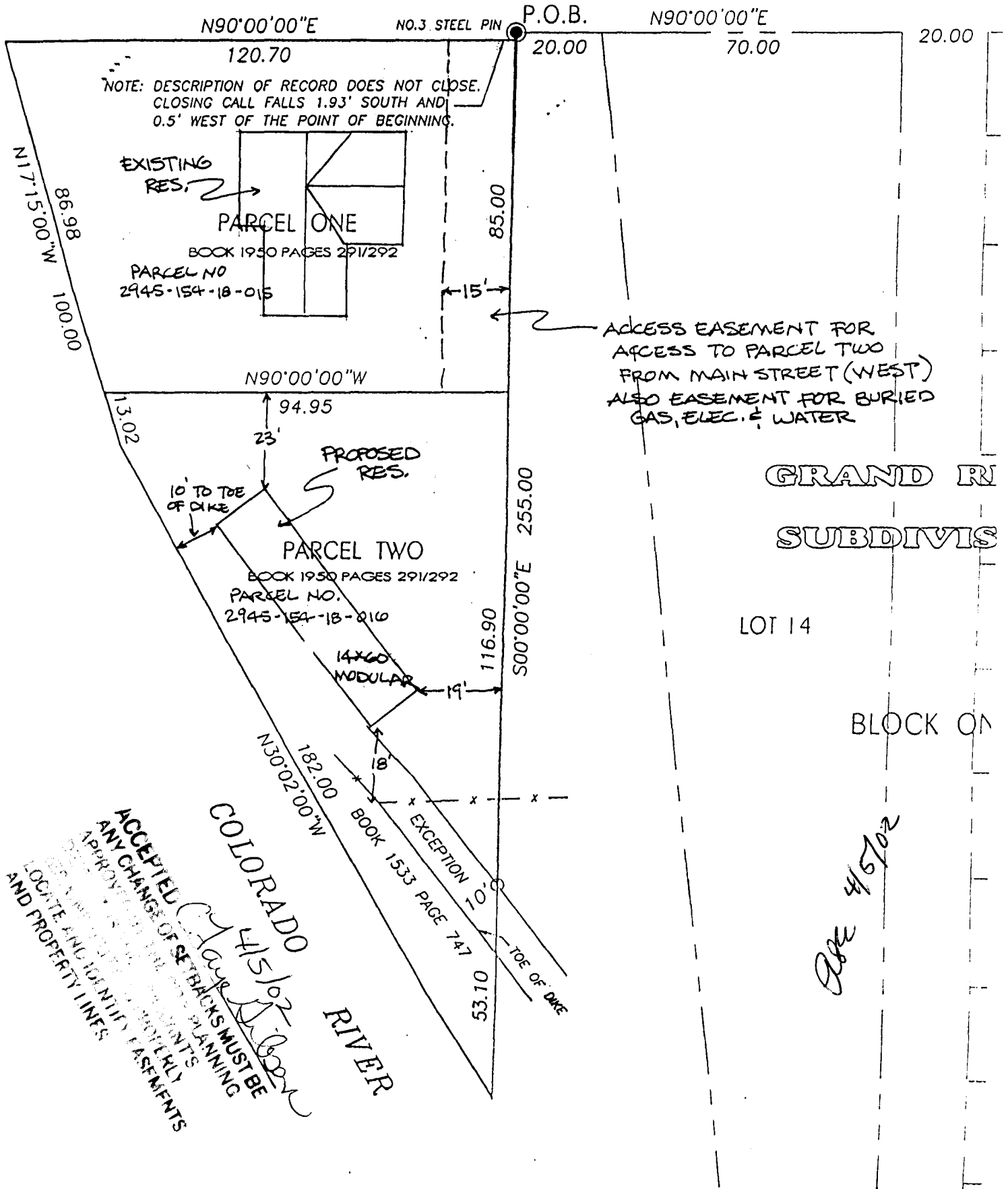
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1.c(1) Grand Junction Zoning & Development Code)

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

SITE PLAN

MAIN STREET

WEST MAIN STREET



GRAND RIVER
SUBDIVISION

LOT 14

BLOCK ON

Done 4/5/02

ACCEPTED FOR RECORD
 ANY CHANGE OF SETBACKS MUST BE
 APPROVED BY THE PLANNING
 DEPARTMENT. ALL EASEMENTS
 LOCATE AND IDENTIFY EASEMENTS
 AND PROPERTY LINES.

4/5/02
John [Signature]

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM
ELEVATION CERTIFICATE

O.M.B. No. 3087-0077
Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME HENRY G. DRAKE		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 831 W. MAIN ST.		Company NA Number
CITY GRAND JUNCTION	STATE CO	ZIP CODE 81501
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 1A, BLOCK 1, GRAND RIVER SUBD, PARCEL# 2945-154-18-014		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) NON-RESIDENTIAL GRAND RIVER SUBD RESIDENTIAL		
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-###" or ##.#####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input checked="" type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:
39°-04'-00" N. LAT / 108°-34'-45" W. LONG.		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER GRAND JUNCTION, 080117		B2. COUNTY NAME MEZA	B3. STATE CO
B4. MAP AND PANEL NUMBER 0006	B5. SUFFIX E	B6. FIRM INDEX DATE FEB 1, 1974	B7. FIRM PANEL EFFECTIVE/REVISED DATE JULY 15, 1992
B8. FLOOD ZONE(S) AE		B9. BASE FLOOD ELEVATION (ft) (Zone AO, use depth of flooding) 4552.45	

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: _____

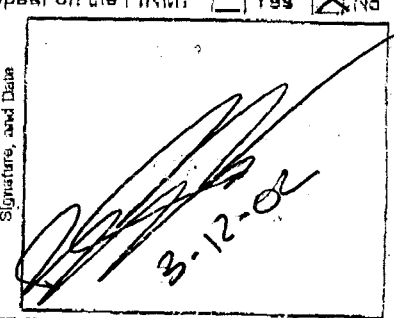
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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. **SEE ATTACHED LETTER, 3-12-02**

C2. Building Diagram Number **8** (Select the building diagram most similar to the building for which this certificate is being completed - use 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 **4552.14** Conversion/Comments _____

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

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	4553.45 ft. (m)	License Number, Embossed Seal, Signature, and Date
<input type="checkbox"/> b) Top of next higher floor	N/A 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 checked="" 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 **BRUCE D. MARVIN** LICENSE NUMBER **14856, CO**

TITLE **PRESIDENT** COMPANY NAME **WESTERN ENGINEERS, INC.**

ADDRESS **2150 HIGHWAY 6 AND 50** CITY **GRAND JUNCTION** STATE **CO** ZIP CODE **81505**

SIGNATURE  DATE **3-12-02** TELEPHONE **970-242-5202**

IMPORTANT: In these spaces, copy the corresponding information from Section A.

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

831 W. MAIN

CITY GRAND VT.

STATE CO

ZIP CODE 81501

Flood Insurance Community Use
Policy Number
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 SEE ATTACHED LETTER DATED 3-12-02. ELEVATION DATUM CONSISTS OF CITY OF GRAND JUNCTION, CO, RIVERSIDE GIS POINT NO. 10, NORTHING 64,682.951, EASTING 126,557.764, ELEVATION 4552.14

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 B-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 HENRY G. DRAKE

ADDRESS 555 BLUFF CT. CITY GRAND VCT. STATE CO ZIP CODE 81503

SIGNATURE Henry G. Drake DATE 2-19-02 TELEPHONE 247-4190

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