

Planning \$ <u>pd</u>	Drainage \$ <u>#12, 207-</u>
TCP \$ <u>10,500</u>	School Impact \$ <u>N/A</u>

.DG PERMIT NO.
FILE # <u>SPR-2004-210</u>

PLANNING CLEARANCE
 (site plan review, multi-family development, non-residential development)
Grand Junction Community Development Department

\$ 9047.00
rev'd 1/31/05

THIS SECTION TO BE COMPLETED BY APPLICANT

BUILDING ADDRESS 2400¹⁵ Blue Heron Dr. TAX SCHEDULE NO. 2945-092-00-948
 SUBDIVISION Blue Heron Lake Industrial SQ. FT. OF EXISTING BLDG(S) 0
 FILING _____ BLK _____ LOT 1 SQ. FT. OF PROPOSED BLDG(S)/ADDITONS 18,000
 OWNER City of Grand Junction MULTI-FAMILY:
 ADDRESS 250 N. 5th Street NO. OF DWELLING UNITS: BEFORE _____ AFTER _____
 CITY/STATE/ZIP Grand Junction, CO 81501 CONSTRUCTION
 APPLICANT Action Bunkery NO. OF BLDGS ON PARCEL: BEFORE 0 AFTER 1
 ADDRESS PO Box 1846 USE OF ALL EXISTING BLDG(S) N/A
 CITY/STATE/ZIP Grand Junction, CO 81502 DESCRIPTION OF WORK & INTENDED USE: Paper
 TELEPHONE 970-242-1110 product manufacturing facility

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>I-2</u>	LANDSCAPING/SCREENING REQUIRED: YES <u>X</u> NO _____
SETBACKS: FRONT: <u>15'</u> from Property Line (PL) or _____ from center of ROW, whichever is greater	PARKING REQUIREMENT: <u>29 spaces Phase 1</u>
SIDE: <u>0'</u> from PL REAR: <u>10'</u> from PL	SPECIAL CONDITIONS: <u>per approved plans</u>
MAX. HEIGHT <u>40'</u>	<u>11/18/04 9 landscape plan</u>
MAX. COVERAGE OF LOT BY STRUCTURES <u>2.0 FAR</u>	<u>dated 1/12/05</u>
	<u>Some landscaping will be on City property adjacent to trail</u>

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.

Four (4) sets of final construction drawings must be submitted and stamped by City Engineering prior to issuing the Planning Clearance. One stamped set must be available on the job site at all times.

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's Signature _____ Date 9-3-04
 Department Approval Gennie Edwards APA Date 1/31/05

Additional water and/or sewer tap fee(s) are required: YES <u>X</u> NO _____	W/O No. <u>17966</u>
Utility Accounting <u>D Overholt</u>	Date <u>3/14/05</u>

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

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

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME <u>ACTION BINDERY</u>		For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>2400 BLUE HERON ROAD</u>		Policy Number	
CITY <u>GRAND JUNCTION</u>	STATE <u>CO</u>	Company NAIC Number	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>TAX ID# 2945-093-00-945</u>		ZIP CODE <u>81505</u>	
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary) <u>LIGHT INDUSTRIAL/OFFICE/WAREHOUSE</u>			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or #####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD-1927 <input checked="" type="checkbox"/> NAD 1983	SOURCE: <input checked="" type="checkbox"/> GPS (Type): <u>RTK</u> <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>GRAND JUNCTION, CITY OF 080117</u>		B2. COUNTY NAME <u>MESA</u>		B3. STATE <u>CO</u>	
B4. MAP AND PANEL NUMBER <u>080115 0460</u>	B5. SUFFIX <u>B</u>	B6. FIRM INDEX DATE <u>July 15, 1992</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>July 15, 1992</u>	B8. FLOOD ZONE(S) <u>AE & X</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>4538.0</u>

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: NCVD 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)

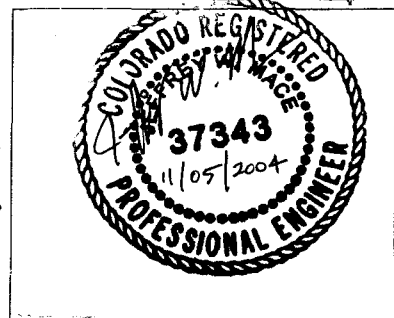
C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

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 Datum - 3.25' = NAVD 1929

Elevation reference mark used MCLCS - P02A Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	<u>4539</u>	<u>35</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)	<u>4535</u>	<u>05</u>	ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	<u>4539</u>	<u>35</u>	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 <u>JEFFREY W. MACE</u>	LICENSE NUMBER <u>37343</u>
TITLE <u>PROJECT ENGINEER</u>	COMPANY NAME <u>THOMPSON - LANGFORD CORP.</u>
ADDRESS <u>529 25 1/2 ROAD, STE. B210</u>	CITY <u>GRAND JUNCTION</u>
SIGNATURE <u>Jeffrey W. Mace</u>	STATE <u>CO</u>
	ZIP CODE <u>81505</u>
	TELEPHONE <u>(970) 243-6667</u>
	DATE <u>11/30/2004</u>

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. 2400 BLUE HERON ROAD			Policy Number
CITY GRAND JUNCTION	STATE CO	ZIP CODE 81505	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

| | 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 E5. 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. The top of the platform of machinery and/or equipment servicing the building is |__| |__| ft. (m) |__| |__| in. (cm) |__| above or |__| below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E5. 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

JEFFREY W. MACE, THOMPSON LANGFORD CORP.

ADDRESS

529 25 1/2 ROAD, STE. B210

CITY

GRAND JUNCTION

STATE

CO

ZIP CODE

81505

SIGNATURE

Jeffrey W. Mace

DATE

11/05/2004

TELEPHONE

(970) 243 6067

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 FLP-2004-210	G5. DATE PERMIT ISSUED 12.6.04	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: New Construction Substantial Improvement

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

4538 . 0 ft. (m) Datum: NVD 1929

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

LOCAL OFFICIAL'S NAME

Laura Lamberty

TITLE

DEVELOPMENT ENGINEER

COMMUNITY NAME

CITY OF GRAND JUNCTION

TELEPHONE

970 244-1555

SIGNATURE

Laura C Lamberty

DATE

12.6.04

COMMENTS

| | Check here if attachments