FÈE\$	10.00
TCP\$	None
CIE	100 00

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

BLDG PERMIT NO.

(Goldenrod: Utility Accounting)

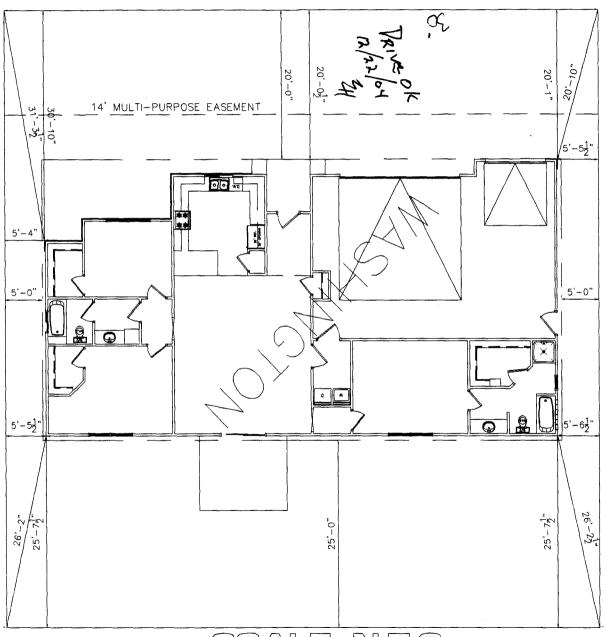
(Single Family Residential and Accessory Structures)

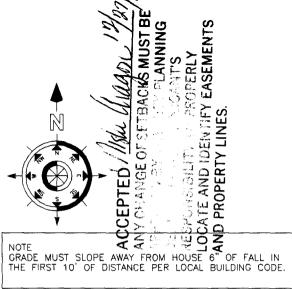
Community Development Department

Building Address <u>2507 Burhanan</u>	No. of Existing Bldgs	No. Proposed
Parcel No. <u>2946-032-10-011p</u>	Sq. Ft. of Existing Bldgs	Sq. Ft. Proposed 2290
Subdivision <u>Colonial</u> Heights	Sq. Ft. of Lot / Parcel	· · · · · · · · · · · · · · · · · · ·
Filing 3 Block 2 Lot 16		ructures & Impervious Surface
OWNER INFORMATION:	(Total Existing & Proposed) _	
Name Sonshine II	DESCRIPTION OF WORK &	
Address 2350 G Road		Addition
City/State/Zip Grand Jct, CD 81505	Other (please specify):	
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSE	D:
Name Sonshine II	Manufactured Home (HUD	
Address 3350 G Road	Other (please specify):	
City/State/Zip Grand Jot, CO 81505	NOTES:	
Telephone <u>255-8853</u>	***************************************	
receptione		
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all o		
•	on & width & all easements & righ	ts-of-way which abut the parcel.
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all of property lines, ingress/egress to the property, driveway location	on & width & all easements & right MUNITY DEVELOPMENT DEP	ts-of-way which abut the parcel. ARTMENT STAFF
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all oproperty lines, ingress/egress to the property, driveway location THIS SECTION TO BE COMPLETED BY CO	MUNITY DEVELOPMENT DEP Maximum coverage of lot by s	ts-of-way which abut the parcel. ARTMENT STAFF structures
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all a property lines, ingress/egress to the property, driveway location to be completed by compact to the property lines. ZONE	MUNITY DEVELOPMENT DEP Maximum coverage of lot by s Permanent Foundation Requi	ts-of-way which abut the parcel. ARTMENT STAFF structures
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all a property lines, ingress/egress to the property, driveway location. THIS SECTION TO BE COMPLETED BY	MUNITY DEVELOPMENT DEP Maximum coverage of lot by s Permanent Foundation Requi	ts-of-way which abut the parcel. ARTMENT STAFF structures
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all a property lines, ingress/egress to the property, driveway location. THIS SECTION TO BE COMPLETED BY	MUNITY DEVELOPMENT DEP Maximum coverage of lot by s Permanent Foundation Requi Parking Requirement Special Conditions Approx From Lic Eng.	ts-of-way which abut the parcel. ARTMENT STAFF structures
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all a property lines, ingress/egress to the property, driveway location. THIS SECTION TO BE COMPLETED BY	MUNITY DEVELOPMENT DEP Maximum coverage of lot by s Permanent Foundation Requirement Special Conditions	ARTMENT STAFF Structures
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all a property lines, ingress/egress to the property, driveway location THIS SECTION TO BE COMPLETED BY	Maximum coverage of lot by s Permanent Foundation Requirement Parking Requirement Special Conditions Approx From Lic English in writing, by the Community Duntil a final inspection has been epartment (Section 305, Uniform the information is correct; I agree to the project. I understand that failures.	ARTMENT STAFF Structures
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all a property lines, ingress/egress to the property, driveway location. THIS SECTION TO BE COMPLETED BY COME SETBACKS: Front Description of the property line (PL). Side from PL Rear Description of the property line (PL). Maximum Height of Structure(s) Description. Driveway Location Approval (Engineer's Initials). Modifications to this Planning Clearance must be approved structure authorized by this application cannot be occupied. Occupancy has been issued, if applicable, by the Building Description.	Maximum coverage of lot by s Permanent Foundation Requirement Parking Requirement Special Conditions Approx From Lic English in writing, by the Community Duntil a final inspection has been epartment (Section 305, Uniform the information is correct; I agree to the project. I understand that failures.	ARTMENT STAFF structures
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all a property lines, ingress/egress to the property, driveway located. THIS SECTION TO BE COMPLETED BY COME THIS SECTION TO BE COMPLETED BY COME TO BE COMPLETED BY COMPLETED B	Maximum coverage of lot by seements a right Munity DEVELOPMENT DEP Maximum coverage of lot by seement Foundation Requirement Parking Park	ARTMENT STAFF structures
THIS SECTION TO BE COMPLETED BY COM ZONE	Maximum coverage of lot by seements and limited provided in the last of last provided in the	ARTMENT STAFF structures
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all a property lines, Ingress/egress to the property, driveway location THIS SECTION TO BE COMPLETED BY	Maximum coverage of lot by seements and limited provided in the last of last provided in the	ARTMENT STAFF structures

(Pink: Building Department)

BUCHANAN DRIVE





DIMENSION LINES ARE PULLED FROM EDGE OF BRICK LEDGE. IF NO BRICK LEDGE EXISTS, DIMENSIONS WILL BE FROM EDGE OF FOUNDATION.

NOTE: BUILDER TO VERIFY ALL SETBACK AND EASEMENT ENCROACHMENTS PRIOR TO CONSTRUCTION

SITE PLAN INFORMATION			
SUBDIVISION NAME	COLONIAL HEIGHTS- FILING 3		
LOT NUMBER	16		
BLOCK NUMBER	2		
STREET ADDRESS	2507 BUCHANAN DRIVE		
COUNTY	MESA		
HOUSE SQ. FT.	?		
LOT SIZE	6610 SF		
	FRONT 20'		
SETBACKS USED	SIDES 5'		
	REAR 25'		

FEDERAL EMERGENCY MANAGEMENT AGENCY ATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE



O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

	SECTION	A - PROPERTY OWNER IN	ORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME SONSHINE II CONSTRUCTION					Policy Number
BUILDING STREET ADDRESS (Including 2507 Buchana)		or Bidg. No.) OR P.O. ROUTE	AND BOX NO.	· · · · · · · · · · · · · · · · · · ·	Company NAIC Number
CITY		STATE		ZIP C	
GRAND JUNCTION	k Ahambaar Tara	CO	ate \	81505	<u> </u>
PROPERTY DESCRIPTION (Lot and Bloc LOT 16 BLK 2, COLONIAL HEIGHTS	FILING III, BK 3573,	PG'S 304-307 PARCEL # 2	945-0		-016
BUILDING USE (e.g., Residential, Non-resi RESIDENTIAL					
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##.##" or ##.#####")		ZONTAL DATUM: 927	SOURCE	E: GPS (T) USGS C	
	SECTION B - FLOO	D INSURANCE RATE MAP (I	FIRM) INFORM	IATION	
B1. NFIP COMMUNITY NAME & COMMUNITY NUM GRAND JUNCTION, COMMUNITY NUMBER 08011		B2. COUNTY NAME MESA		,	B3. STATE CO
B4. MAP AND PANEL NUMBER 0801170003 E	B6. FIRM INDEX DAT	7-15-1992	ATE B8. F	LOOD ZONE(S) AO	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 4590
B10. Indicate the source of the Base Flood Eleval FIS Profile SI FIRM B11. Indicate the elevation datum used for the BF B12. Is the building located in a Coastal Barrier R	☐ Community D E in B9: ☑ NGVD 19	etermined Othe 29 NAV	er (Describe):Oth		Designation Date
		ELEVATION INFORMATIO			
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. Flevations – 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 C3a-i below according to the					n the datum used for the RFF in
Section B. convert the datum to that used for					
Section D or Section G, as appropriate, to do					with water the second will be the second with the second water the second will be second with the seco
Datum NAVD88 Conversion/Comments N	GVD1929 BFE 4590 +	3.0 = 4593.0 BFE NAVD88			
Elevation reference mark usedDoes toDoes to		mark used appear on the FIRM? 4594. On ft. (m)	☐ Yes 🖾 No	g	THE SOUND THE STATE OF THE STAT
☐ b) Top of next higher floor	-	<u>N/A</u> ft.(m)		ibossed Seal, d Date	TO SELVIOR TO SERVE
C) Bottom of lowest horizontal structural m	ember (V zones only)	<u>N/A</u> fL(m)		Date	
d) Attached garage (top of slab)		<u>N/A</u> ft.(m)		ind [到 20644 广告
e) Lowest elevation of machinery and/or e	• •			₽ 5 B B	PART 20674 TO SO THE PART OF T
servicing the building (Describe in a Co	•	<u>N/A</u> ft.(m)		natur /	18 3 9-13 B
f) Lowest adjacent (finished) grade (LAG)		ft_(m)		2 gg	V THIN ONA MID SURFIE
 g) Highest adjacent (finished) grade (HAG h) No. of permanent openings (flood vents) 	•	ft.(m)		License Number, Emi Signature, and	MINIMAN LAND MINIMAN
i) No. or permanent openings (nood venis	•	-		5 [
SE	CTION D - SURVEY	OR, ENGINEER, OR ARCHIT	TECT CERTIFIC	CATION	
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 b	e punishable by fine	•	Code, Section 1	1001.	
CERTIFIER'S NAME MICHAEL W. DRISSEL	•		LICENS	ENUMBER F	PLS 20677
TITLE PRESIDENT/PLS		COMPANY N	AME	DH SURVE	YS INC
ADDRESS	1	CITY		STATE	
118 OURAY AVENUE		GRAND JUNG	CTION	CO	81501
SIGNATURE SIGNATURE	/h/_//	DATE 9-	13-04	TELEPI (970)24	

IMP,ORTANT; In these spaces, copy the corresponding information from			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/o No.) OR P.O. ROUTE AND 2507 BUChanan Drive	BOX NO.		Policy Number
ITY STA' RAND JUNCTION CO	ΓE	ZIP CODE 81505	Company NAIC Number
SECTION D - SURVEYOR, ENGINEER, OR A	RCHITECT CERTI	FICATION (CONTINU	ED)
opy both sides of this Elevation Certificate for (1) community official, (2) insurance agent	/company, and (3) bui	iding owner.	
COMMENTS			
CECTION E DUE DESCRIPTION REPORTATION CUIDNEY	YOT DEOLEDED) E	OD ZONE AO AND Z	Check here if attachmen
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY IN r Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Co			
ction C must be completed Building Diagram Number(Select the building diagram most similar to the building for			
represents the building, provide a sketch or photograph.)			
t. The top of the bottom floor (including basement or enclosure) of the building isft.(n	n) _in.(cm) 🔲 above	or Delow (check on	e) the highest adjacent grade. (Use
natural grade, if available). I. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated	floor (elevation b) of th	ne building isft(m)_	_in.(cm) above the highest adjacent
grade. Complete items C3.h and C3.i on front of form. The top of the platform of machinery and/or equipment servicing the building isft.(n	n) in (cm) [] show	or Thelewisherk on	a) the highest adjacent grade. (Like
natural grade, if available).		_ ,	
 For Zone AO only: If no flood depth number is available, is the top of the bottom floor e Yes No Unknown. The local official must certify this information in Sect 	tion G.		
SECTION F - PROPERTY OWNER (OR OWN			
he property owner or owner's authorized representative who completes Sections A, B, C	•	**	nithout a FEMA-issued or community-
sued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are of	CORRECT TO THE DEST OF M	у кломеаде.	
PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME SONSHINE CONSTRUCTION II			
ADDRESS	CITY	STA	
2350 G ROAD	GRAND JUNCTIC		81505 EPHONE
SIGNATURE) / ///	DATE 9/14/6		-255-8853
COMMENTS			
			Check here if attachment
SECTION G - COMMUNITY IN	FORMATION (OP	TIONAL)	
e local official who is authorized by law or ordinance to administer the community's floodp	····		tions A, B, C (or E), and G of this Eleva
rtificate. Complete the applicable item(s) and sign below.	•	•	, , ,
. The information in Section C was taken from other documentation that has been significant that has been significant.	•		gineer, or architect who is authorized b
or local law to certify elevation information. (Indicate the source and date of the ele . A community official completed Section E for a building located in Zone A (without a		•	ono AO
The following information (Items G4-G9) is provided for community floodplain mana		municy-based or L/O/24	ARAU.
4. PERMIT NUMBER G5. DATE PERMIT ISSUED	I G6 D	ATE CERTIFICATE OF COI	MPLIANCE/OCCUPANCY ISSUED
FLP-2004-214 9/30 This permit has been issued for: New Construction Substantial Improvement			
Elevation of as-built lowest floor (including basement) of the building is:		. ft. (m)	Datum: NAV 8
BFE or (in Zone AO) depth of flooding at the building site is:	<u>4593.</u>	. ft. (m)	Datum: NAV 8
OCAL OFFICIAL'S NAME	TITLE		
RICK DOTTIS			ent Engineer
OMMUNITY NAME City of Grand Junction	TELEPHOI	270 230-T	034
IGNATURE Roll Come	DATE	9-30-04	
COMMENTS			
			
			Check here if attachments