TCP\$ Nme

SIF\$ 292 00

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

BLDG PERMIT NO.

(Single Family Residential and Accessory Structures)

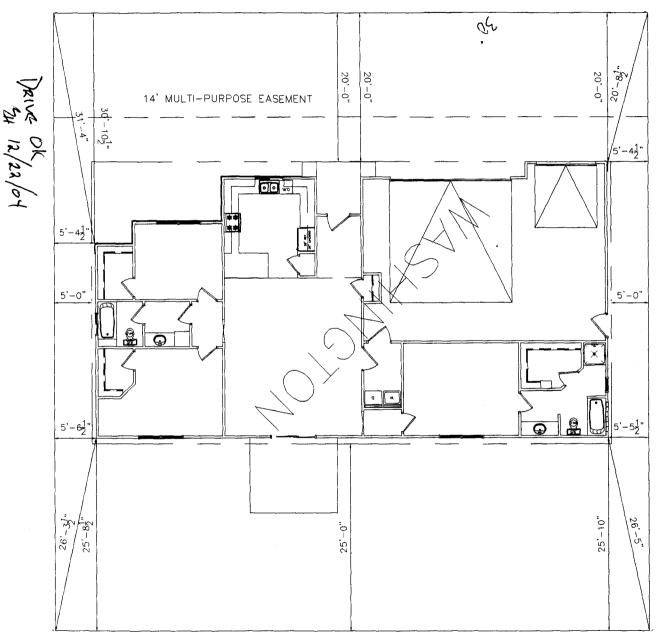
Community Development Department

Ruchanan___ No. of Existing Bldgs ______ No. Proposed _ **Building Address** Sq. Ft. of Existing Bldgs _____ Sq. Ft. Proposed ________ Parcel No. Sq. Ft. of Lot / Parcel ____ Block Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _ OWNER INFORMATION: **DESCRIPTION OF WORK & INTENDED USE:** Name New Single Family Home (*check type below) Interior Remodel Addition Address Other (please specify): ___ CD 81505 *TYPE OF HOME PROPOSED: APPLICANT INFORMATION: 2 Site Built Manufactured Home (UBC) Manufactured Home (HUD) Name Other (please specify):_____ Address CO 81505 NOTES: ⁻ 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 Maximum coverage of lot by structures Permanent Foundation Required: YES X NO from property line (PL) from PL Parking Requirement Special Conditions (CONTOURL) Maximum Height of Structure(s) Driveway **Voting District** Location Approval_ (Engineer's Initials) 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 Department Approval NA Additional water and/or sewer tap fee(s) are required: NO W/O No. Date **Utility Accounting** VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning & Development Code)

(Pink: Building Department)

(Goldenrod: Utility Accounting)

BUCHANAN DRIVE





NOTE
GRADE MUST SLOPE AWAY FROMEHOUSE 6" OF FALL IN
THE FIRST 10' OF DISTANCE PER LOCAL BUILDING CODE.

NOTE:
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	17
BLOCK NUMBER	2
STREET ADDRESS	2509 BUCHANAN DRIVE
COUNTY	MESA
HOUSE SQ. FT.	?
LOT SIZE	6622 SF
	FRONT 20'
SETBACKS USED	SIDES 5'
	REAR 25'

FEDERAL EMERGENCY MANAGEMENT AGENCY

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

		Ampontant I		io on pages i .	·		
		SECTION A	- PROPERTY ON	NER INFORMAT	TION	For Insuran	ce Company Use:
BUILDING OWNER'S NA SONSHINE II CONS						Policy Nu	mber
BUILDING STREET ADD			Bldg. No.) OR P.O.	ROUTE AND BO	X NO.	Company	NAIC Number
CITY GRAND JUNCTION			ST	ATE	ZJP 8150	CODE 05	
PROPERTY DESCRIPTION LOT 17, BLK 2, COLO	ON (Lot and Block	Numbers, Tax Parcel	Number, Legal Des	cription etc.)	- 037 -10	-017	
BUILDING USE (e.g., Res							
LATITUDE/LONGITUDE ((##°-##'-##.##" or ##:			NTAL DATUM: 7 NAD 1983	SC	DURCE: GPS (USGS	Type): Quad Map	☑ Other: PLAT
	S	ECTION B - FLOOD	INSURANCE RAT	MAP (FIRM) IN	FORMATION		
B1. NFIP COMMUNITY NAME 8	COMMUNITY NUM	RER	B2. COUNTY NAME			B3. STATE	
GRAND JUNCTION, COMMUNI			MESA			со	
B4. MAP AND PANEL NUMBER 0801170003	B5. SUFFIX E	B6. FIRM INDEX DATE 1-06-1882 /993	EFFECTIVE/R	I PANEL EVISED DATE 1992	B8. FLOOD ZONE(S		OOD ELEVATION(S) use depth of flooding) 4590
B10. Indicate the source of the	Base Flood Elevat	ion (BFE) data or base fk	ood depth entered in E	9.			
	⊠ FIRM	Community Dete		Other (Describ			
B11. Indicate the elevation date					Other (Describe)		
B12. Is the building located in a						o Designation Da	te
	SEC	TION C - BUILDING I	LEVATION INFO	EMATION (SURV	EY REQUIRED)		
C1. Building elevations are bas	ed on: 🛛 Constru	ction Drawings*	Building Under Con	struction*	Finished Construction	}	
*A new Elevation Certificat	e will be required w	then construction of the b	uilding is complete.				
C2. Building Diagram Number	1 (Select the buildin	na diaaram most similar ta	the building for which	this certificate is be	eing completed - see	pages 6 and 7. If n	o diagram
accurately represents the b	ouilding, provide a s	sketch or photograph.)					•
C3. Flevations - Zones A1-A30). AE. AH. A (with B	BFE), VE. V1-V30, V (with	BFE), AR, AR/A, AR	/AE, AR/A1-A30, AI	R/AH, AR/AO		
Complete Items C3a-i bel	low according to the	e building diagram specif	ed in Item C2. State t	ne datum used. If th	e datum is different fr	om the datum used	for the BFE in
Section B. convert the datu	im to that used for t	he BFE. Show field mea	surements and datum	conversion calculat	tion. Use the space p	provided or the Com	ments area of
Section D or Section G. as	appropriate, to doo	cument the datum conver	sion.				^
Datum NAVD88 Convers	ion/Comments_N	GVD1929 BFE 4590 + 3.	0 = 4593.0 BFE NAV	<u>)88</u>			
Elevation reference mark u	sedDoes th	ne elevation reference ma	rk used appear on th	FIRM? Yes	⊠ No	HILLIAN PARTIE	WHITE TO
a) Top of bottom floor (i	ncluding basement	or enclosure)	4594,29	fL(m)	T T	MINIMADO	REGION
b) Top of next higher flo	or	•	<u>N/A</u> 1		Seal,	SHIP OF SE	N. S. W. S.
c) Bottom of lowest hori	izontal structural me	ember (V zones only)	<u>N/A</u> 1		Embossed (E.O. W.	多种是
d) Attached garage (top		,	<u>N/A.</u> 1		혈멸		/W MISO
e) Lowest elevation of n		quipment		. ,		恒多红/20)677 「15雪
servicing the building	-	• •	<u>N/A</u> f	.(m)	ature of	1 ARAN	o of the
f) Lowest adjacent (finis	hed) grade (LAG)	•			Z 5	1/1/83 Q	13-0 - 13-0 LANO SURINI
g) Highest adjacent (fini	shed) grade (HAG))			License Number	THE ON	SURIUM
h) No. of permanent ope	enings (flood vents)) within 1 ft. above adjace	nt grade N/A	•	<u></u>	THINING ONAL	TA MANAGE
i) Total area of all perma	anent openings (flo	od vents) in C3.h <u>N/A</u> sq.	in. (sq. cm)		_		,
	SEC	CTION D - SURVEYO	R ENGINEER OR	ARCHITECT CE	RTIFICATION		
This certification is to be sig						formation	
certify that the information	in Sections A. B.	and C on this certificat	in represents my be	st efforts to intern	ret the data availabl	e	
I understand that any false						.	
CERTIFIER'S NAME MICH			•		ICENSE NUMBER	PLS 20677	
TITLE PRESIDENT	T/PLS		COI	PANY NAME	DH SURV	EYS INC	
ADDRESS			CITY	7	STAT	E Z	ZIP CODE
118 OURAY AVENUE				ND JUNCTION	CO		31501
SIGNATURE Much	1/11/11	hell	DAT	E 9-13-04		PHONE 245-8749	
,				/	` '		

	opy the corresponding information f		,		For Insurance Company Use:		
BUILDING STREET ADDRESS (Including A	pt., Unit, Suite, and/o No.) OR P.O. ROUTE			U	Policy Number		
ITY RAND JUNCTION	1411 D. 35	STATE CO		ZIP CODE 81505	Company NAIC Number		
	CTION D - SURVEYOR, ENGINEER, (CERTIFICAT		JED)		
	ate for (1) community official, (2) insurance a						
COMMENTS							
					Check here if attachmo		
SECTION E - RUE DING	ELEVATION INFORMATION (SURV	EY NOT REQU	RED) FOR Z	ONE AO AND Z			
	complete Items E1 through E4. If the Elevati						
ection C must be completed.	-						
	e building diagram most similar to the building	ng for which this c	ertificate is being	g completed - see	pages 6 and 7. If no diagram accura		
represents the building, provide a ske	, , ,	At (m) in (mm)	ГП а мана ан Г	Theterry/abook or	na) tha hishaat adiasant amada. // ba		
I ne top or the bottom noor (including t natural grade, if available).	pasement or enclosure) of the building is	_ rc(m)inc(cm)	∐ above or ∟		ne) une myrrest aujacem graue. (Use		
	ngs (see page 7), the next higher floor or ele	vated floor (elevat	ion b) of the build	ding isft.(m)_	in.(cm) above the highest adjacent		
grade. Complete items C3.h and C3.		•	,	- - · /-	_		
	and/or equipment servicing the building is $ _$	_ ft.(m)in.(cm)	above or [below (check or	ne) the highest adjacent grade. (Use		
natural grade, if available).					- d-d-:		
•	umber is available, is the top of the bottom fl ne local official must certify this information in		cordance with th	ie community's flo	papiain management ordinance?		
	TON F - PROPERTY OWNER (OR C		RESENTATIV	E) CERTIFICAT	10N		
	d representative who completes Sections A						
	The statements in Sections A, B, C, and E						
PROPERTY OWNER'S OR OWNER'S	AUTHORIZED REPRESENTATIVE'S NAI	ME					
SONSHINE CONSTRUCTION II		OTT (07	ATE TID CODE		
ADDRESS 2350 G ROAD		CITY	JUNCTION	CO	ATE ZIP CODE 81505		
SIGNATURE <	a whole	DATE		4	LEPHONE		
0018/5150	1 101ck		7/14/0	970)-255-8853		
COMMENTS							
<u> </u>			· · · · · · · · · · · · · · · · · · ·				
					Check here if attachme		
	SECTION G - COMMUNI						
	or ordinance to administer the community's t	Roodplain manage	ment ordinance	can complete Sec	tions A, B, C (or E), and G of this Ele		
ertificate. Complete the applicable item(s	s) and sign below. taken from other documentation that has be	on eignod and am	hocead by a line	nnead cuniquiat an	rainaar or amhitaat who is authorizar		
	promation. (Indicate the source and date of the	-		-	gence, or alcohood who is authorized		
•	ection E for a building located in Zone A (with			•	one AO.		
The following information (Items G	4-G9) is provided for community floodplain	management pun	xoses.				
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE C	ERTIFICATE OF CO	MPLIANCE/OCCUPANCY ISSUED		
FLP-2004-214	9/30						
7. This permit has been issued for: [2] N 8. Elevation of as-built lowest floor (includ	lew Construction Substantial Improver	ment -	4594.29 ft. ((m)	Datum: NAV 88		
s. Elevation of as-built towest 11001 (inicide 9. BFE or (in Zone AO) depth of flooding			4593.00 ft. (` '	Datum: NAV 88		
COAL OFFICIALIO MARKE			me		-		
COMMUNITY NAME Rick Dorris City of Grand Junction		T	TITLE Dev		velopment Engineer		
		Ť	ELEPHONE	970-256-4034			
SIGNATURE /		D	ATE	9-30-04	-		
COMMENTS KILL SO	my		<u> </u>				
20MMEN 12							
					· · · · · · · · · · · · · · · · · · ·		
					Check here if attachme		
					MICHAEL GRANNIE		