

Planning \$	5.00
TCP \$	0
Drainage \$	0
SIF \$	0

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)
Community Development Department

BLDG PERMIT NO.
FILE #

3,964 sqft
EXISTING

FINISH LINE @ MESA MALL

Building Address 2424 HWY 6 E 50
 Parcel No. MESA MALL
 Subdivision 2945-043-06-003

Multifamily Only:
 No. of Existing Units _____ No. Proposed _____
 Sq. Ft. of Existing _____ Sq. Ft. Proposed _____
 Sq. Ft. of Lot / Parcel _____
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

Filing _____ Block _____ Lot _____

OWNER INFORMATION:

Name MIAPRECH COMPANY
 Address 401 WILSHIRE BLVD SUITE 700
 City / State / Zip SANTA MONICA, CA 90401

DESCRIPTION OF WORK & INTENDED USE:

Remodel Addition
 Change of Use (*Specify uses below)
 Other: _____

* FOR CHANGE OF USE:

*Existing Use: _____

*Proposed Use: _____

APPLICANT INFORMATION:

Name ALLEGHENY DESIGN MGMT. INC.
 Address 1154 PARKS INDUSTRIAL DRIVE
 City / State / Zip LANCASTER, PA 17690
 Telephone 717-845-7336

Estimated Remodeling Cost \$ 237,840.00

Current Fair Market Value of Structure \$ 2,237,370.

REQUIRED: One plot plan, on a 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 C-1 Maximum coverage of lot by structures _____

SETBACKS: Front _____ from property line (PL) Landscaping/Screening Required: YES _____ NO _____

Side _____ from PL Rear _____ from PL Parking Requirement N/A

Maximum Height of Structure(s) _____ Special Conditions: interior remodel only

Voting District _____ Ingress / Egress 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 Anthony M. Buterly Date 8/9/04

Department Approval Gayleen Henderson Date 8-9-04

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. _____
Utility Accounting	<u>Jobi Oehlert</u>		Date <u>8/9/04</u>

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning & Development Code)
 (White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldrod: Utility Accounting)