

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 #

Building Address 2470 Highway 6950
Parcel No. 2945-091-21-004
Subdivision GRAND MESA CENTER
Filing OP3 Block _____ Lot _____

Multifamily Only:
No. of Existing Units _____ No. Proposed _____
Sq. Ft. of Existing 6500 Sq. Ft. Proposed 1950
Sq. Ft. of Lot / Parcel 1.214 AC
Sq. Ft. Coverage of Lot by Structures & Impervious Surface
(Total Existing & Proposed) 6500 SF

OWNER INFORMATION:

Name OP3 CACHE, LLC
Address The NORTH
City / State / Zip G.V. 81503

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name SCOTT YOUNG
Address 410 STONE RIDGE CT
City / State / Zip G.V. 81503
Telephone 970 245 1188

*** FOR CHANGE OF USE:**

*Existing Use: _____

*Proposed Use: _____

Estimated Remodeling Cost \$ 110,000.-

Current Fair Market Value of Structure \$ _____

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 C-2 Maximum coverage of lot by structures _____
SETBACKS: Front _____ from property line (PL) Landscaping/Screening Required: YES N/A NO _____
Side _____ from PL Rear _____ from PL Parking Requirement _____
Maximum Height of Structure(s) _____ Special Conditions: _____
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 Steve Valley Date 10/14/04

Department Approval Gayleen Henderson Date 10-14-04

Additional water and/or sewer tap fee(s) are required: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> W/O No.	<u>tenant fresh</u>
Utility Accounting <u>Power</u>	Date <u>10-14-04</u>