

Planning \$ <u>10.00</u>
TCP \$
Drainage \$
SIF\$

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

BLDG PERMIT NO.
FILE #

6703-4175

Building Address 1155 North Ave
 Parcel No. 2945-141-06-008
 Subdivision _____
 Filing _____ Block _____ Lot _____

Multifamily Only:
 No. of Existing Units 0 No. Proposed 0
 Sq. Ft. of Existing 0 Sq. Ft. Proposed 250
 Sq. Ft. of Lot / Parcel 250
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name Arbys
 Address 1155 North Ave
 City / State / Zip Grand Jct CO 81501

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name Tamara Martinez
 Address 1155 North Ave
 City / State / Zip Grand Jct CO 81501
 Telephone (970) 245-2904

*** FOR CHANGE OF USE:**

*Existing Use: _____
 *Proposed Use: _____

Estimated Remodeling Cost \$ _____

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-1 Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL) Landscaping/Screening Required: YES _____ NO X
 Side _____ from PL Rear _____ from PL Parking Requirement _____
 Maximum Height of Structure(s) _____ Special Conditions: Replacing a freezer
 Voting District _____ Ingress / Egress Location Approval with new one
 (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).

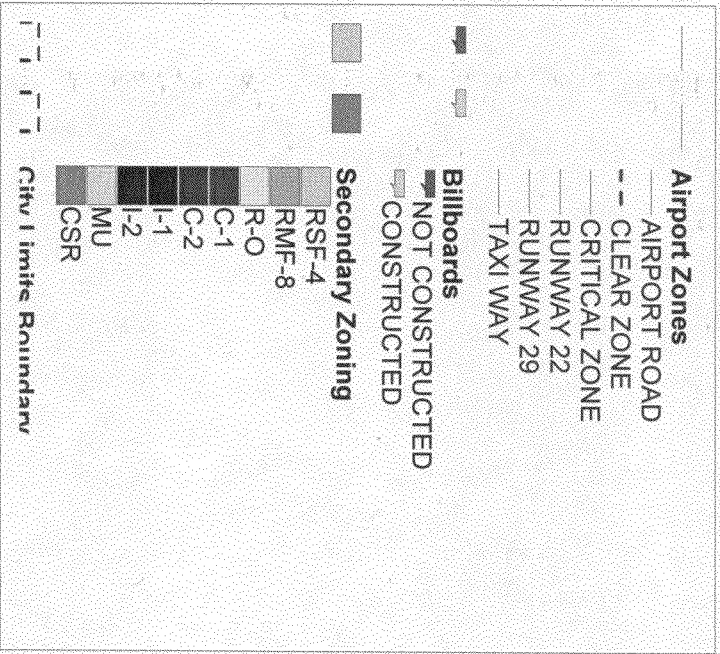
I hereby acknowledge that I have read this application and the information is correct; I agree to comply with any and all codes, ordinances, laws, regulations or restrictions which apply to the project. I understand that failure to comply shall result in legal action, which may include but not necessarily be limited to non-use of the building(s).

Applicant Signature Tamara Martinez Date 7-13-04
 Department Approval Wishu Mazon Date 7/13/04

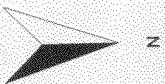
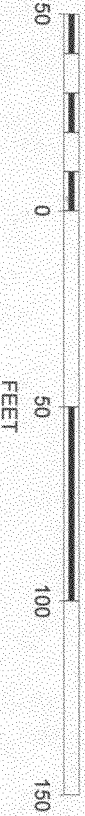
Additional water and/or sewer tap fee(s) are required:	YES	NO <u>X</u>	W/O No. <u>New Freezer</u>
Utility Accounting <u>X</u>	Date <u>7/13/04</u>		

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) (Goldenrod: Utility Accounting)

City of Grand Junction GIS Zoning Map



SCALE 1 : 592



ACCEPTED *Alissa Brown* 7/13/04
 ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPARTMENT.
 THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.