FEE \$	10.00
TCP\$	Ø
SIF \$	292,00

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

(Single Family Residential and Accessory Structures)

Community Development Department

~. ~	DED. 117 116	
BLDG	PERMIT NO).

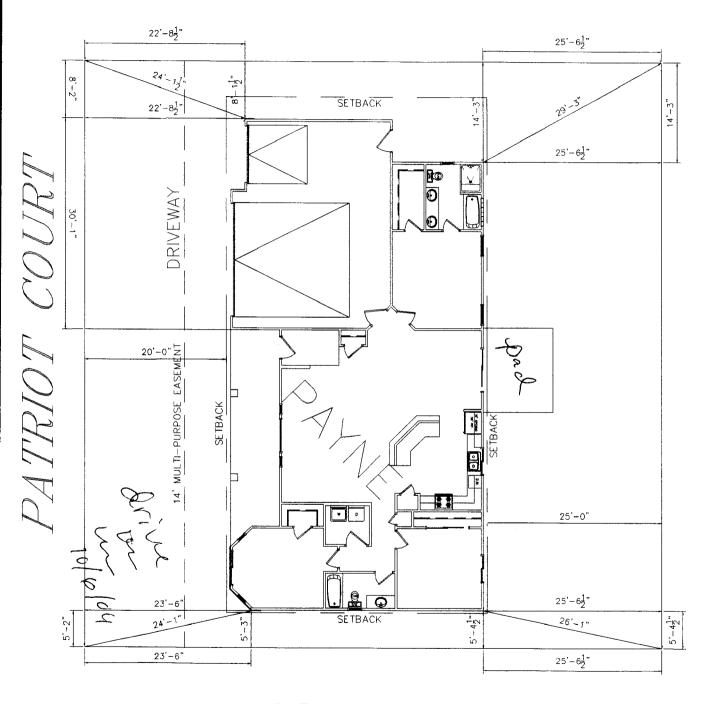


our Bridge to a Better Community

(Goldenrod: Utility Accounting)

	· · · · · · · · · · · · · · · · · · ·
BLDG ADDRESS 690 Patriot	SQ. FT. OF PROPOSED BLDGS/ADDITION 2217
TAX SCHEDULE NO. <u>2946-032-10-013</u>	SQ. FT. OF EXISTING BLDGS
SUBDIVISION Colonial Heights	TOTAL SQ. FT. OF EXISTING & PROPOSED 2217
FILING 3 BLK 2 LOT 13 (1) OWNER SONSHINE II (1) ADDRESS 2350 G ROAD (1) TELEPHONE 255-8853 (2) APPLICANT SONSHINE II (2) ADDRESS 2350 G ROAD (2) TELEPHONE 255-8853	NO. OF DWELLING UNITS: Before: After: this Construction NO. OF BUILDINGS ON PARCEL Before: After: this Construction USE OF EXISTING BUILDINGS DESCRIPTION OF WORK & INTENDED USE Site Built Manufactured Home (UBC) Manufactured Home (HUD) Other (please specify)
REQUIRED: One plot plan, on 8 ½" x 11" paper, showing	all existing & proposed structure location(s), parking, setbacks to all cation & width & all easements & rights-of-way which abut the parcel.
SETBACKS: Front	Maximum coverage of lot by structures (0000 Permanent Foundation Required: YES_K_NO Parking Req'mt Special Conditions
structure authorized by this application cannot be occupi Occupancy has been issued, if applicable, by the Building I hereby acknowledge that I have read this application and	the information is correct; I agree to comply with any and all codes, the project. I understand that failure to comply shall result in legal
Department Approval H Bayleen Henderson	Date 10-12-04
Additional water and/or sewer tap fee(s) are required:	YES NO W/O No, 7 659
Jtility Accounting Charles	Date /0 (20)
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE	(Section 9-3-2C Grand Junction Zoring & Development Code)

(Pink: Building Department)



ACCEPTED Sayleen Henderson
ANY CHANGE OF SETBACKS MUST BE
APPROVED BY THE CITY PLANNING
DEFT. IT IS THE APPLICANT'S
RESPONSIBILITY TO PROPERLY
LOCATE AND IDENTIFY EASEMENTS
AND PROPERTY LINES.



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

NOTE:

BUILDER TO VERIFY
ALL SETBACK AND EASEMENT
ENCROACHMENTS PRIOR
TO CONSTRUCTION

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

SITE PLAN INFORMATION					
SUBDIVISION NAME	COLONIAL HEIGHTS- FILING 3				
LOT NUMBER	13				
BLOCK NUMBER	2				
STREET ADDRESS	690 PATRIOT COURT				
COUNTY	MESA				
HOUSE SQ. FT.	1564 SF				
LOT SIZE	6870 SF				
	FRONT 20'				
SETBACKS USED	SIDES 5'				
	REAR 25'				

SCALE: N.T.S.

ELEVATION CERTIFICATE

Ĵ

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

Important: Read the instructions on pages 1 - 7. SECTION A - PROPERTY OWNER INFORMATION For Insurance Company Use: **BUILDING OWNER'S NAME** Policy Number SONSHINE II CONSTRUCTION BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Company NAIC Number Patrint Court ZIP CODE CITY STATE **GRAND JUNCTION** 81505 PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 13, BLK 2, COLONIAL HEIGHTS FILING III, BK 3573, PG'S 304-307 PARCEL # 2 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: SOURCE: GPS (Type): (##° - ##' - ##.##" or ##.####") NAD 1927 □ NAD 1983 USGS Quad Map Other: PLAT SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER **B2. COUNTY NAME B3. STATE** GRAND JUNCTION, COMMUNITY NUMBER 080117 MESA **B7. FIRM PANEL B4. MAP AND PANEL B9. BASE FLOOD ELEVATION(S)** NUMBER **B5. SUFFIX B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE **B8. FLOOD ZONE(S)** (Zone AO, use depth of flooding) 0801170003 E 1-06-1882 / 98-2 7-15-1992 4590 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. **⊠** FIRM Community Determined Other (Describe): B11. Indicate the elevation datum used for the BFE in B9: X NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe): B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🔲 Yes 🛛 No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Building Under Construction* C1. Building elevations are based on:

☐ Construction Drawings* 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B. convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G. as appropriate, to document the datum conversion. Datum NAVD88 Conversion/Comments NGVD1929 BFE 4590 + 3.0 = 4593.0 BFE NAVD88 Elevation reference mark used Does the elevation reference mark used appear on the FIRM?

Yes

No a) Top of bottom floor (including basement or enclosure) 4594. ODA (m) Seal, b) Top of next higher floor N/A . __fL(m) Signature, and Date ☐ c) Bottom of lowest horizontal structural member (V zones only) N/A . __ft(m) ☐ d) Attached garage (top of slab) N/A. __ft(m) ☐ e) Lowest elevation of machinery and/or equipment Number, servicing the building (Describe in a Comments area) N/A . __fL(m) f) Lowest adjacent (finished) grade (LAG) . ft(m) -icense g) Highest adjacent (finished) grade (HAG) ft(m) ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION 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 be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. CERTIFIER'S NAME MICHAEL W. DRISSEL LICENSE NUMBER PLS 20677 TITLE PRESIDENT/PLS COMPANY NAME DH SURVEYS INC ADDRESS STATE ZIP CODE 118 OURAY AVENUE **GRAND JUNCTION** 81501 CO SIGNATURE DATE TELEPHONE

(970)245-8749

IMPORTANT: In these spaces, copy the corresponding information from			For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and No.) OR P.O. ROUTE AND	BOX NO.		Policy Number	
	ATE	ZIP CODE 81505	Company NAIC Number	
SECTION D - SURVEYOR, ENGINEER, OR			D)	
opy both sides of this Elevation Certificate for (1) community official, (2) insurance ager				
COMMENTS				
			Check here if attachments	
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY				
r Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation (ction C must be completed.	Certificate is intended for use	e as supporting informa	ation for a LOMA or LOMR-F,	
 Building Diagram Number _(Select the building diagram most similar to the building for represents the building, provide a sketch or photograph.) 	or which this certificate is bei	ng completed – see pa	ages 6 and 7. If no diagram accurately	
The top of the bottom floor (including basement or enclosure) of the building is ft.(m) in.(cm) above or	below (check one) the highest adjacent grade. (Use	
natural grade, if available).				
For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevate grade. Complete items C3.h and C3.i on front of form.	d floor (elevation b) of the bi	uilding isft.(m)i	n.(cm) above the highest adjacent	
The top of the platform of machinery and/or equipment servicing the building isft.(natural grade, if available).	m)in.(cm) [above or	below (check one)) the highest adjacent grade. (Use	
For Zone AO only: If no flood depth number is available, is the top of the bottom floor Yes No Unknown. The local official must certify this information in Ser		the community's flood	plain management ordinance?	
SECTION F - PROPERTY OWNER (OR OW)	IER'S REPRESENTAT	VE) CERTIFICATION	Ж	
ne property owner or owner's authorized representative who completes Sections A, B, sued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are	•	•	thout a FEMA-issued or community-	
ROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME ONSHINE CONSTRUCTION II				
DDRESS	CITY	STAT		
350 G ROAD IGNATURE	GRAND JUNCTION DATE	CO TELE	81505 PHONE	
D / ////	9/14/09	/	255-8853	
OMMENTS / //				
			☐ Check here if attachments	
SECTION G - COMMUNITY	NFORMATION (OPTIO	NAL)	Gricactiole il allego li il citto	
e local official who is authorized by law or ordinance to administer the community's flood			ons A, B, C (or E), and G of this Elevati	
tificate. Complete the applicable item(s) and sign below.			, ,	
The information in Section C was taken from other documentation that has been s or local law to certify elevation information. (Indicate the source and date of the elevation)			neer, or architect who is authorized by	
A community official completed Section E for a building located in Zone A (without			ne AO.	
The following information (Items G4-G9) is provided for community floodplain man		. ,		
4. PERMIT NUMBER G5. DATE PERMIT ISSUED 9/30/		CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED	
This permit has been issued for: New Construction Substantial Improvement	4594.1	1. (m)	Datum: NAV 8	
Elevation of as-built lowest floor (including basement) of the building is:	4593. f	` '	Datum: <u>NAV 8</u> Datum: <u>NAV 8</u>	
BFE or (in Zone AO) depth of flooding at the building site is:		_		
DCAL OFFICIAL'S NAME Rick Dorris	TITLE	Developme	ent Engineer	
DMMUNITY NAME City of Grand Junction	TELEPHONE	970-256-40	34	
GNATURE A CO	DATE	9-30-04		
OMMENTS				
			☐ Check here if attachments	