FEE \$	10.00
	None
SIF\$	000 .0

(White: Planning)

(Yellow: Customer)

PLANNING CLEARANCE

\sim	
(\mathbf{u})	
WV	

BLDG PERMIT NO.

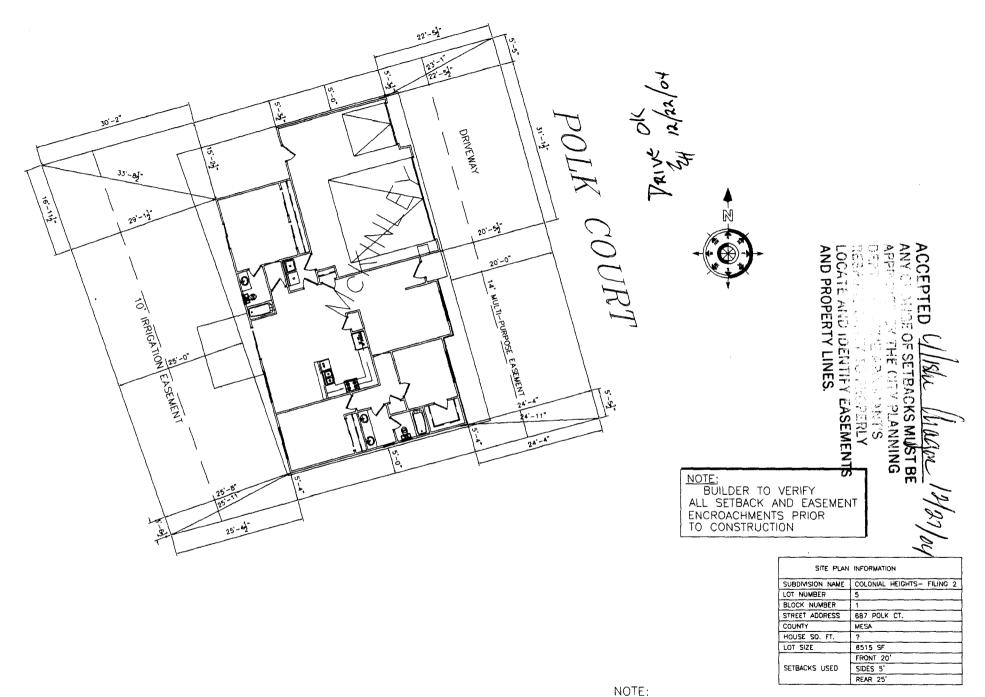
(Goldenrod: Utility Accounting)

(Single Family Residential and Accessory Structures)

Community Development Department

Building Address 1087 Polk	No. of Existing Bldgs	No. Proposed
Parcel No. <u>2945 - 032 - 94 - 005</u>	Sq. Ft. of Existing Bldgs	Sq. Ft. Proposed 3 7010
Subdivision <u>Colonial Heights</u>	Sq. Ft. of Lot / Parcel	
Filing <u>2</u> Block <u>1</u> Lot <u>5</u>	Sq. Ft. Coverage of Lot by Structi (Total Existing & Proposed)	
OWNER INFORMATION:	(Total Existing & Proposed)	
Name Sonshine II	DESCRIPTION OF WORK & INT	ENDED USE:
Address 2350 G Road	New Single Family Home (*ch	Addition
City/State/Zip Grand Jct, CD 81505	Other (please specify):	
APPLICANT INFORMATION:	*TYPE OF HOME PROPOSED:	
Name Sonshine II Address 2350 G Road	Site Built Manufactured Home (HUD) Other (please specify):	Manufactured Home (UBC)
City/State/Zip Grand Jet, CO 81505	NOTES:	
Telephone <u>255-8853</u>	NOTEO.	
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all e.	xistina & proposed structure location	n(s), parking, setbacks to all
property lines, ingress/egress to the property, driveway location	n & width & all easements & rights-o	f-way which abut the parcel.
property lines, ingress/egress to the property, driveway location THIS SECTION TO BE COMPLETED BY COMP	n & width & all easements & rights-o	f-way which abut the parcel.
property lines, ingress/egress to the property, driveway location	n & width & all easements & rights-o MUNITY DEVELOPMENT DEPART	f-way which abut the parcel. TMENT STAFF
property lines, ingress/egress to the property, driveway location THIS SECTION TO BE COMPLETED BY COMP	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by structure.	TMENT STAFF ctures (1) %
THIS SECTION TO BE COMPLETED BY COMP	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by structure.	rMENT STAFF etures
THIS SECTION TO BE COMPLETED BY COMP ZONE	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by struct Permanent Foundation Required: Parking Requirement	rMENT STAFF etures (1) % YES X NO
THIS SECTION TO BE COMPLETED BY COMP ZONE	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by struct Permanent Foundation Required: Parking Requirement	rMENT STAFF etures (1) % YES X NO
THIS SECTION TO BE COMPLETED BY COMP ZONE	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by struct Permanent Foundation Required: Parking Requirement Special Conditions Affinal in writing, by the Community Deve	Fway which abut the parcel. FMENT STAFF Etures
THIS SECTION TO BE COMPLETED BY	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by struct Permanent Foundation Required: Parking Requirement Special Conditions Lic Eng. in writing, by the Community Development (Section 305, Uniform Businformation is correct; Lagree to compare the building(s).	Interes (1) To YES Y NO
THIS SECTION TO BE COMPLETED BY	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by struct Permanent Foundation Required: Parking Requirement Special Conditions Afficial in writing, by the Community Deventil a final inspection has been compartment (Section 305, Uniform Build information is correct; Lagree to comproject. I understand that failure to	Interes (1) To YES Y NO
THIS SECTION TO BE COMPLETED BY	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by struct Permanent Foundation Required: Parking Requirement Special Conditions Lic Eng. in writing, by the Community Development (Section 305, Uniform Businformation is correct; Lagree to compare the building(s).	Interes (1) To YES Y NO
THIS SECTION TO BE COMPLETED BY	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by struct Permanent Foundation Required: Parking Requirement Special Conditions Afroval In writing, by the Community Deventil a final inspection has been compartment (Section 305, Uniform Buinformation is correct; Lagree to core project. I understand that failure to on-use of the building(s). Date Date	Interes (1) To YES Y NO
THIS SECTION TO BE COMPLETED BY	MUNITY DEVELOPMENT DEPART Maximum coverage of lot by struct Permanent Foundation Required: Parking Requirement Special Conditions Africal in writing, by the Community Development a final inspection has been compartment (Section 305, Uniform Building information is correct; I agree to correct on-use of the building(s). Date Date	Interes (1) To YES X NO

(Pink: Building Department)



SCALE N.T.S.

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

FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE



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 Company NAIC Number BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. Court CITY STATE ZIP CODE 81505 **GRAND JUNCTION** CO PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc. LOT S. BLK 1, COLONIAL HEIGHTS FILING I PARCEL# 294 -94-005 BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL SOURCE: GPS (Type) LATITUDE/LONGITUDE (OPTIONAL) HORIZONTAL DATUM: (##° - ##' - ##.##" 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 **B4. MAP AND PANEL** B7. FIRM PANEL **B9. BASE FLOOD ELEVATION(S) B8. FLOOD ZONE(S)** NUMBER **B5. SUFFIX B6. FIRM INDEX DATE** EFFECTIVE/REVISED DATE (Zone AO, use depth of flooding) 1-06-1982 1983 0801170003 7-15-1992 AO B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. ☐ FIS Profile **⊠ 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 X No Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on:

Construction Drawings* ☐ Building Under Construction* ☐ 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 - 7 ones 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 RADO REC Elevation reference mark used Does the elevation reference mark used appear on the FIRM? Yes X No Militaria Milita a) Top of bottom floor (including basement or enclosure) 4594.40fL(m) Number, Embossed Seal ☐ b) Top of next higher floor N/A . __ft(m) Signature, and Date ☐ c) Bottom of lowest horizontal structural member (V zones only) N/A. ft.(m) (top of slab) N/A. __ft.(m) e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) N/A.__ft.(m) ☐ f) Lowest adjacent (finished) grade (LAG) _. ___ft.(m) g) Highest adjacent (finished) grade (HAG) fL(m) MINIMUM LANGE ☐ 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 CITY STATE ZIP CODE 118 OURAY AVENUE **GRAND JUNCTION** CO 81501 SIGNATURE DATE TELEPHONE (970)245-8749

MPORTANT; In these spaces, copy the corresponding information from S	Section A.		For Insurance Company Use:
UILDING STREET ADDRESS (Including Apt., Unit, Suite, and/on No.) OR P.O. ROUTE AND I	BOX NO.	U	Policy Number
Y STAT	E	ZIP CODE	Company NAIC Number
AND JUNCTION CO SECTION D - SURVEYOR, ENGINEER, OR A	POUNTECT CERTIFIC	81505	<u> </u>
SECTION D - SURVEYOR, ENGINEER, OR ALL OPPY both sides of this Elevation Certificate for (1) community official, (2) insurance agenta			
	company, and (3) unide	y UMIRA.	
COMMENTS			
			Check here if attachme
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY N	OT REQUIRED) FOR	ZONE AO AND Z	
Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Ce			
ction C must be completed.			
Building Diagram Number _(Select the building diagram most similar to the building for	which this certificate is be	ing completed – see	pages 6 and 7. If no diagram accurate
represents the building, provide a sketch or photograph.) The top of the bottom floor (including basement or enclosure) of the building isft.(m	ı) in (mm)∏ ahove or	☐ helow (check o	ne) the hinhest arlianent grade. (I lise
natural grade, if available).	/_#L(GII/		ic) the highest engage in great. Total
For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated	floor (elevation b) of the b	uilding isft.(m)_	_in.(cm) above the highest adjacent
grade. Complete items C3.h and C3.i on front of form.) in family [7] it was	☐ halam fala sale	sol the highest ediness and and a
The top of the platform of machinery and/or equipment servicing the building isft.(m natural grade, if available).	ı)in.(cm) [] above or	TT DESOM (CLIECK O	ie) ine nignest abjacent grade. (Use
natural grade, it available). For Zone AO only: If no flood depth number is available, is the top of the bottom floor ele	evated in accordance with	n the community's flo	odplain management ordinance?
Yes No Unknown. The local official must certify this information in Section	ion G.		
SECTION F - PROPERTY OWNER (OR OWNE			
the property owner or owner's authorized representative who completes Sections A, B, C			without a FEMA-issued or community
sued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are c ROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME	CITIECT TO THE DEST OF THY K	nomeoge.	
ONSHINE CONSTRUCTION II			
DORESS OFFI O POATS	CITY		ATE ZIP CODE
350 G ROAD IGNATURE	GRAND JUNCTION DATE	CC	81505 LEPHONE
D/ ////	9/11/0)-255-8853
OMMENTS		·	
			Check here if attachme
SECTION G - COMMUNITY IN	FORMATION (OPTIC	MAL)	
e local official who is authorized by law or ordinance to administer the community's floodpl	lain management ordinar	ice can complete Se	ctions A, B, C (or E), and G of this Ele
tificate. Complete the applicable item(s) and sign below. . [] The information in Section C was taken from other documentation that has been sig	ned and embreced by a	linanead eurovar ar	ninger or amhitent who is authorized
or local law to certify elevation information. (Indicate the source and date of the ele-	•		gence, or architect who is authorized
$\ \ \square$ A community official completed Section E for a building located in Zone A (without a	FEMA-issued or commu		one AO.
The following information (Items G4-G9) is provided for community floodplain manage	gement purposes.		
4. PERMIT NUMBER G5. DATE PERMIT ISSUED 9/30/0	G6. DATE	CERTIFICATE OF CO	MPLIANCE/OCCUPANCY ISSUED
This permit has been issued for: New Construction Substantial Improvement			
Elevation of as-built lowest floor (including basement) of the building is:	<u> 4594.40</u>	` /	Datum: NAV 88
	<u>4593.00</u>	ft. (m)	Datum: NAV 88
BFE or (in Zone AO) depth of flooding at the building site is:			
OCAL OFFICIAL'S NAME Rick Dorris	TITLE	 Develon	nent Engineer
OCAL OFFICIAL'S NAME	TITLE TELEPHONE		ment Engineer 4034
OCAL OFFICIAL'S NAME Rick Dorris		Developi 970-256- 9-30-04	