

Planning \$	5.00
TCP \$	/
Drainage \$	/
SIF\$	/

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

BLDG PERMIT NO.
FILE #

Building Address 2139 12<sup>th</sup> ST 65  
 Parcel No. 2945-111-33-002  
 Subdivision \_\_\_\_\_  
 Filing \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Multifamily Only:  
 No. of Existing Units \_\_\_\_\_ No. Proposed \_\_\_\_\_  
 Sq. Ft. of Existing 1200 Sq. Ft. Proposed 1200  
 Sq. Ft. of Lot / Parcel \_\_\_\_\_  
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface  
 (Total Existing & Proposed) \_\_\_\_\_

**OWNER INFORMATION:**

Name Judy GESKE  
 Address \_\_\_\_\_  
 City / State / Zip \_\_\_\_\_

**DESCRIPTION OF WORK & INTENDED USE:**

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

**APPLICANT INFORMATION:**

Name LYNN BENNIS  
 Address 4600 E. SCENIC DR.  
 City / State / Zip CO 81503  
 Telephone 234-6457

\* FOR CHANGE OF USE:  
 \*Existing Use: Service  
 \*Proposed Use: Salon / Hair  
 Estimated Remodeling Cost \$ 15,000  
 Current Fair Market Value of Structure \$ 119,530

**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 <u>RO</u>	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 _____
Maximum Height of Structure(s) _____	Special Conditions: <u>interior</u>
Voting District _____	Ingress / Egress Location Approval _____ (Engineer's Initials) <u>remodel only</u>

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 [Signature] Date 3-17-05  
 Department Approval [Signature] Date 3-17-05

Additional water and/or sewer tap fee(s) are required: YES <input type="radio"/> NO <input checked="" type="radio"/> W/O No. <input type="checkbox"/>
Utility Accounting <u>[Signature]</u> Date <u>3-17-05</u>