

Planning \$ <u>5.00</u>
TCP \$
Drainage \$
SIF \$

# PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

## Community Development Department

11614-7203

BLDG PERMIT NO.
FILE #

Building Address 2021 N 12<sup>th</sup> STREET  
 Parcel No. 2945-111-00-971  
 Subdivision \_\_\_\_\_  
 Filing \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Multifamily Only:  
 No. of Existing Units \_\_\_\_\_ No. Proposed \_\_\_\_\_  
 Sq. Ft. of Existing 364 Sq. Ft. Proposed 364  
 Sq. Ft. of Lot / Parcel \_\_\_\_\_  
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface  
 (Total Existing & Proposed) \_\_\_\_\_

### OWNER INFORMATION:

Name Community Hospital  
 Address 2021 N 12<sup>th</sup> STREET  
 City / State / Zip GJ CO 81501

### DESCRIPTION OF WORK & INTENDED USE:

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

*(Remodel)*

### APPLICANT INFORMATION:

Name WCS WHITTAKER  
 Address 2021 N 12<sup>th</sup> STREET  
 City / State / Zip GJ CO 81501  
 Telephone cell 260-8925

### \* FOR CHANGE OF USE:

\*Existing Use: SURGERY WASHER DISINFECTOR  
 \*Proposed Use: SAME

Estimated Remodeling Cost \$ 64,703

Current Fair Market Value of Structure \$ 4,316,650.00

**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 PD  
 SETBACKS: Front \_\_\_\_\_ from property line (PL)  
 Side \_\_\_\_\_ from PL Rear \_\_\_\_\_ from PL  
 Maximum Height of Structure(s) \_\_\_\_\_  
 Voting District \_\_\_\_\_ Ingress / Egress Location Approval \_\_\_\_\_  
 (Engineer's Initials) only

Maximum coverage of lot by structures \_\_\_\_\_  
 Landscaping/Screening Required: YES \_\_\_\_\_ NO X  
 Parking Requirement N/A  
 Special Conditions: Interior remodel

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 Michael White Date \_\_\_\_\_  
 Department Approval Wishu Magu Date 6/29/05

Additional water and/or sewer tap fee(s) are required:	YES	<input checked="" type="radio"/> NO	W/O No. <u>(18.93 EAUS)</u>
Utility Accounting	<u>[Signature]</u>		Date <u>6-29-05</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)