Planning \$ 5,00 PLANNING C	BLDG PERMIT NO.
TCP\$ (Multifamily & Nonresidential Rer	
Drainage \$ Community Develo	oment Department
SIF\$	(18)
Building Address 1445 N 7464 Parcel No. 2945-14-00-047	Multifamily Only: No. of Existing Units No. Proposed Sq. Ft. of Existing Sq. Ft. Proposed
Subdivision	Sq. Ft. of Lot / Parcel
Filing Block Lot	Sq. Ft. Coverage of Lot by Structures & Impervious Surface
OWNER INFORMATION:	(Total Existing & Proposed)
Name VACCEY Montage Address 646 MANW 94.	DESCRIPTION OF WORK & INTENDED USE: Remodel, Interior Addition Change of Use (*Specify uses below) Other:
City / State / Zip 8/50/	* FOR CHANGE OF USE:
APPLICANT INFORMATION:	^^
Name L 6 D Construction	*Existing Use: Offices *Proposed Use: Offices
Address P.O Box 1925	Troposed Ose.
City / State / Zip 65- Co 8/507	
Telephone 242-243-447/	Current Fair Market Value of Structure \$ 38,400,00
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 COM	MUNITY DEVELOPMENT DEPARTMENT STAFF
ZONE R-O	Maximum coverage of lot by structures
SETBACKS: Front from property line (PL)	Landscaping/Screening Required: YESNO
Side 5 from PL Rear 10 from PL	Parking Requirement
Maximum Height of Structure(s) 35/	Special Conditions:
Ingress / Egress Voting District Location Approval_ (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).	

Department Approva

Additional water and/or sewer tap fee(s) are required: YES NO W/O No.

Utility Accounting

Date

Date

Date

Date

Date

Date

Applicant Signature

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)