Planning \$ 5.00 PLANNING CL	EARANCE BLDG PERMIT NO.
TCP \$ (Multifamily & Nonresidential Rem	
Drainage \$ Community Develop	
SIF\$ 237 Sq. 31	Advance Pharmacy
Building Address 917 Main	Multifamily Only:  No. of Existing Units No. Proposed
Parcel No. 2945 - 144 - 30 - 008	Sq. Ft. of Existing Sq. Ft. Proposed
Subdivision 127 19+20	Sq. Ft. of Lot / Parcel
Filing Block Lot State	Sq. Ft. Coverage of Lot by Structures & Impervious Surface
OWNER INFORMATION:	(Total Existing & Proposed)
Name Don Jens of Fred Stapleton	DESCRIPTION OF WORK & INTENDED USE: Remodel Addition
Address 744 Horizon Ct.	Change of Use (*Specify uses below) Other:
City / State / Zip 35, Co 3150G	* FOR CHANGE OF USE:
APPLICANT INFORMATION:	*Existing Use: <u>RAHAIL - Old NAPA STOY</u>
Name tard Construction	*Proposed Use: Office USL / Warthou.
Address 719 Acrowst Rd. Sulch	Proposed Ose:
City/State/Zip Grand Jet. Co 81505	Estimated Remodeling Cost \$
Telephone <u>245</u> -9347	Current Fair Market Value of Structure \$
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 OFFICE	
zone <u>B-2</u>	Maximum coverage of lot by structures $\mathcal{N}/\mathcal{A}$
SETBACKS: Front 15' from property line (PL)	Landscaping/Screening Required: YESNOX
Sidefrom PL Rearfrom PL	Parking Requirement ///
Maximum Height of Structure(s)	Special Conditions: <u>Interior remedol</u> only
Voting District Ingress / Egress Location Approval_ (Engineer's Initials)	<i>J</i>
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	Date > 3 1-0 5
Department Approval 1/18/12 Magn Date 5-3/-05	
Additional water and/or sewer tap fee(s) are required: YES	NO W/O No.
Utility Accounting Market	Date NO Manufacturing to Ketal
VALID FOR CIVIAONITUS FROM DATE OF ISSUANCE (See	stion 0.0 C.1 Crand Tunction 7 Sping ( Dougland ant Code)

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)