

Planning \$ <u>0</u>	Drainage \$ <u>1710.00</u>
TCP \$ <u>6405.54</u>	School Impact \$ <u>0</u>

①

BLDG PERMIT NO.
FILE # <u>SPR-2005-147</u>

PLANNING CLEARANCE

(site plan review, multi-family development, non-residential development)
Grand Junction Community Development Department

THIS SECTION TO BE COMPLETED BY APPLICANT

BUILDING ADDRESS 552 W MAIN ST

SUBDIVISION -

FILING - BLK - LOT -

OWNER MESA COUNTY VALLEY SCHOOL DISTRICT 51

ADDRESS 2115 GRAND AVE

CITY/STATE/ZIP GRAND JUNCTION CO 81501

APPLICANT BLYTHE DESIGN - DAVID DETWILER

ADDRESS 618 NOOD AVE

CITY/STATE/ZIP GRAND JUNCTION, CO 81501

TELEPHONE 242-1058

TAX SCHEDULE NO. 2945-154-00-942

SQ. FT. OF EXISTING BLDG(S) 11,665

SQ. FT. OF PROPOSED BLDG(S)/ADDITONS 17,036

MULTI-FAMILY:
 NO. OF DWELLING UNITS: BEFORE - AFTER -
 CONSTRUCTION

NO. OF BLDGS ON PARCEL: BEFORE - AFTER -
 CONSTRUCTION

USE OF ALL EXISTING BLDG(S) SCHOOLS

DESCRIPTION OF WORK & INTENDED USE: SCHOOL

Submittal requirements are outlined in the SSID (Submittal Standards for Improvements and Development) document.

THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF

ZONE <u>CSP</u>	LANDSCAPING/SCREENING REQUIRED: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
SETBACKS: FRONT: <u>15</u> from Property Line (PL) or from center of ROW, whichever is greater SIDE: <u>5</u> from PL REAR: <u>10</u> from PL	PARKING REQUIREMENT: <u>24 spaces</u>
MAX. HEIGHT <u>05</u>	SPECIAL CONDITIONS: <u>Need flood form upon completion</u> <u>DIA required for bus turnaround</u> <u>per letter 8/5/05 Blanchard to Mills</u>
MAX. COVERAGE OF LOT BY STRUCTURES <u>NA</u> <u>LO FAR</u>	

Modifications to this Planning Clearance must be approved, in writing, by the Community Development Department Director. The structure authorized by this application cannot be occupied until a final inspection has been completed and a Certificate of Occupancy has been issued by the Building Department (Section 307, Uniform Building Code). Required improvements in the public right-of-way must be guaranteed prior to issuance of a Planning Clearance. All other required site improvements must be completed or guaranteed prior to issuance of a Certificate of Occupancy. Any landscaping required by this permit shall be maintained in an acceptable and healthy condition. The replacement of any vegetation materials that die or are in an unhealthy condition is required by the Grand Junction Zoning and Development Code.

Four (4) sets of final construction drawings must be submitted and stamped by City Engineering prior to issuing the Planning Clearance. One stamped set must be available on the job site at all times.

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's Signature <u>[Signature]</u>	Date <u>8-5-05</u>
Department Approval <u>[Signature]</u>	Date <u>8/5/05</u>

Additional water and/or sewer tap fees are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>18279</u>
Utility Accounting <u>[Signature]</u>	Date <u>8/8/05</u>		

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning and Development Code)

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

340 REM OF CHAIN I

ACCEPTED *KVA 8/5/05*
ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DEPT. IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.

Highway

N 68°38'28" E 439.44'

STANDARD ACCESSIBLE PARKING STALL PER CITY G.J. STANDARDS

NEW SANITARY SEWER LINE ALIGNMENT BY OTHERS

PLAYGROUND CONSISTING OF WOOD CHIPS OR SOME OTHER "SAFE" MATERIAL REFER TO LANDSCAPING DRAWINGS FOR DETAILS

20.00' PROPOSED SANITARY SEWER EASEMENT

15.53' PL-BUILDING CORNER

N 63°26'28" E 11.97'

EX. 3" SEWER LINE TO BE ABANDONED & RE-LOCATED

PROPOSED SCHOOL
17,036 SF
FF=4557.20

PROPOSED BIKE RACK LOCATION (SEE ARCH. DRAWINGS FOR DETAILS)

PROPOSED SECURITY LIGHT (TYP.)

TRANSFORMER PAD W/CHAINLINK FENCING

West Street

56.88' PL-BLDG

56.88' PL-BLDG

6.00' WALK

FDC

FLAG POLE

LOW BRICK WALLS (SEE ARCH. DRAWINGS FOR DETAILS)

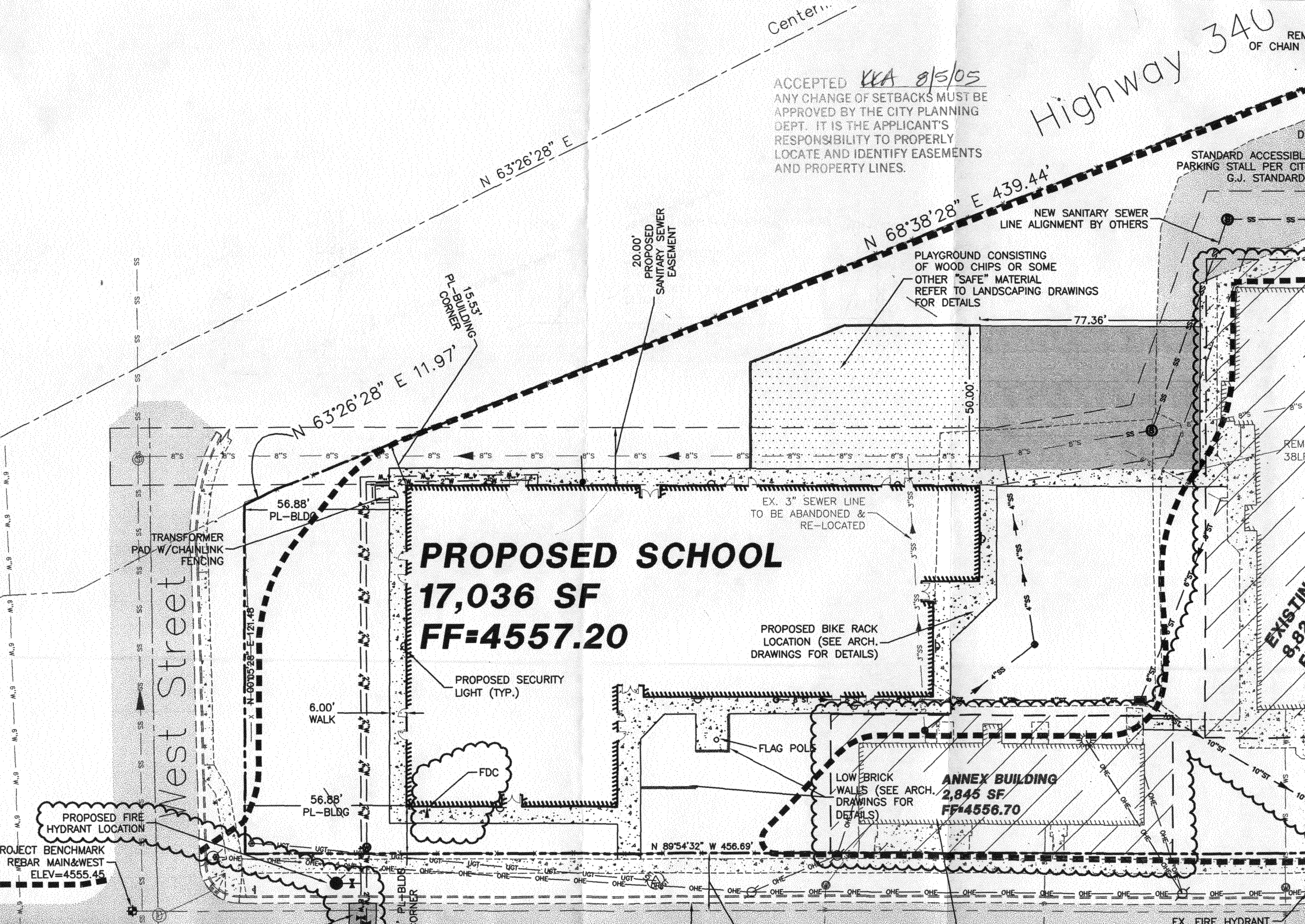
ANNEX BUILDING
2,845 SF
FF=4556.70

PROJECT BENCHMARK CSM #5 REBAR MAIN&WEST ELEV=4555.45

N 89°54'32" W 456.69'

EX. FIRE HYDRANT

EXISTING 8.82'



FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:
BUILDING OWNER'S NAME RIVERSIDE WEST LOT SCHOOL DISTRICT #51		Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 552 WEST MAIN		Company NAIC Number
CITY GRAND JUNCTION	STATE Colo	ZIP CODE 81501
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 2945-154-00-942		
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) SCHOOL		
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ##.#####°)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983	SOURCE: <input checked="" type="checkbox"/> GPS (Type): MESA COUNTY SIMMS <input type="checkbox"/> USGS Quad Map <input checked="" type="checkbox"/> Other MESA COUNTY
39°-04'-04" N, 108°-34'-39" W		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER CITY OF GRAND JUNCTION, COLO		B2. COUNTY NAME MESA	B3. STATE COLORADO
B4. MAP AND PANEL NUMBER D80117-0006	B5. SUFFIX E	B6. FIRM INDEX DATE JULY 15, 1992	B7. FIRM PANEL EFFECTIVE/REVISED DATE —
B8. FLOOD ZONE(S) AE		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 4553	

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: 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 No
Designation Date: _____

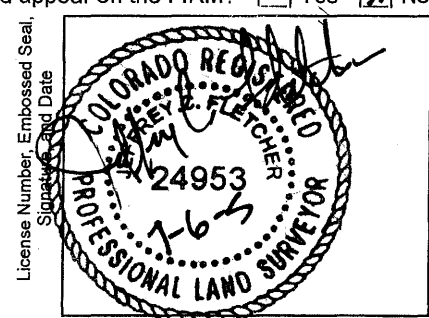
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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 **8** (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. Elevations - Zones 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 **NAVD 1988** Conversion/Comments **3.2 FT**
Elevation reference mark used **MCO #1 (GPS BASE)** Does the elevation reference mark used appear on the FIRM? Yes No

<input checked="" type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	4557	20	ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____	_____	ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____	_____	ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____	_____	ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	_____	_____	ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	_____	_____	ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	_____	_____	ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	_____	_____	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h	_____	_____	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 **JEFFREY C. FLETCHER** LICENSE NUMBER **PLS 24953**

TITLE **PROF. LAND SURVEYOR** COMPANY NAME **HIGH DESERT SURVEYING**

ADDRESS **2591 B³/₄ Rd** CITY **GRAND JCT** STATE **CO** ZIP CODE **81503**

SIGNATURE **Jeffrey C. Fletcher** DATE **1-6-05** TELEPHONE **970-254-8649**

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1. through E5. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number _____ (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.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is _____ ft. (m) _____ in. (cm) _____ above or _____ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is _____ ft. (m) _____ in. (cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is _____ ft. (m) _____ in. (cm) _____ above or _____ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft. (m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft. (m) Datum: _____

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

Check here if attachments

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

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- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

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LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

Check here if attachments