

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

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

BLDG PERMIT NO.
FILE #

18284-11724

Building Address 1100 Pattenson Rd Multifamily Only: \_\_\_\_\_  
Parcel No. 2945-024-23-971 No. of Existing Units \_\_\_\_\_ No. Proposed \_\_\_\_\_  
Subdivision St. Mary's Hospital Sq. Ft. of Existing 1700 Sq. Ft. Proposed 1780  
Filing \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_  
Sq. Ft. of Lot / Parcel \_\_\_\_\_  
Sq. Ft. Coverage of Lot by Structures & Impervious Surface  
(Total Existing & Proposed) \_\_\_\_\_

**OWNER INFORMATION:**

Name ST Mary's Hosp  
Address 1100 Pattenson Rd  
City / State / Zip G.J. Co 81502

**DESCRIPTION OF WORK & INTENDED USE:**

Remodel  Addition  
 Change of Use (\*Specify uses below)  
 Other: New Spa 6'x10'

**APPLICANT INFORMATION:**

Name SKyline Homes + Pools  
Address 2289 County Rd 1-A  
City / State / Zip Montrose, Co 81401  
Telephone (970) 626-5055

\* FOR CHANGE OF USE:  
\*Existing Use: St. Mary's Hospital  
\*Proposed Use: SANU

Estimated Remodeling Cost \$ 100,000  
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.**

<b>THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT DEPARTMENT STAFF</b>	
ZONE <u>PD</u>	Maximum coverage of lot by structures _____
SETBACKS: Front _____ from property line (PL)	Landscaping/Screening Required: YES _____ NO <u>X</u>
Side _____ from PL Rear _____ from PL	Parking Requirement <u>N/A</u>
Maximum Height of Structure(s) _____	Special Conditions: <u>Interior remodel</u>
Voting District _____	Ingress / Egress Location Approval <u>only</u> (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).

Applicant Signature [Signature] Date 6-8-05  
Department Approval [Signature] Date 6-8-05

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No.
Utility Accounting <u>[Signature]</u>	Date <u>6/8/05</u>		