

Planning \$	5.00
TCP \$	0
Drainage \$	0
SIF \$	0

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

BLDG PERMIT NO.
FILE #

Building Address 521 Road
Parcel No. 2945-143-17-003
Subdivision _____
Filing _____ Block _____ Lot _____

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

OWNER INFORMATION:

Name Corky Inc.
Address 1624 Crestview Court
City / State / Zip G.T. Co 81506

DESCRIPTION OF WORK & INTENDED USE:

Remodel Addition
 Change of Use (*Specify uses below)
 Other: Removing walls & adding walls

APPLICANT INFORMATION:

Name Centennial Const.
Address 2030 Paint Pony Ct.
City / State / Zip G.T. Co 81503
Telephone 250-6827

* FOR CHANGE OF USE:
*Existing Use: Office
*Proposed Use: Office
Estimated Remodeling Cost \$ 4,000
Current Fair Market Value of Structure \$ 129,310
287,400.00

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 COMMUNITY DEVELOPMENT DEPARTMENT STAFF	
ZONE <u>B-2</u>	Maximum coverage of lot by structures _____
SETBACKS: Front _____ from property line (PL)	Landscaping/Screening Required: YES _____ NO <input checked="" type="checkbox"/>
Side _____ from PL Rear _____ from PL	Parking Requirement <u>N/A</u>
Maximum Height of Structure(s) _____	Special Conditions: <u>Interior</u>
Voting District _____	Ingress / Egress Location Approval _____ (Engineer's Initials) <u>Remodel only</u>

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 Mark B. Blum Date 10-3-05
Department Approval Gary Hall Date 10/4/05

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. _____
Utility Accounting <u>[Signature]</u>	Date <u>10/04/05</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)