

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 201 & 205 COLORADO AVE
 Parcel No. 2945-143-26-015
 Subdivision _____
 Filing _____ Block 123 Lot 1 & 2

Multifamily Only:
 No. of Existing Units _____ No. Proposed 3
 Sq. Ft. of Existing 9750 Sq. Ft. Proposed 9750
 Sq. Ft. of Lot / Parcel _____
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name William, Tyler, & SHANE BERTON
 Address P.O. Box 207
 City / State / Zip GATEWAY CO

DESCRIPTION OF WORK & INTENDED USE:

Remodel Addition
 Change of Use (*Specify uses below)
 Other: DEMO only

APPLICANT INFORMATION:

Name SRB CONSTRUCTION
 Address P.O. Box 207
 City / State / Zip GATEWAY CO
 Telephone 970 931 2208

* FOR CHANGE OF USE:
 *Existing Use: VACANT
 *Proposed Use: MIXED COMM/RES.
 Estimated Remodeling Cost \$ ~~50,000~~ 10,000
 Current Fair Market Value of Structure \$ ~~155,000~~ 214

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 <u>15'</u> from property line (PL)	Landscaping/Screening Required: YES _____ NO _____
Side <u>0'</u> from PL Rear <u>0'</u> from PL	Parking Requirement _____
Maximum Height of Structure(s) _____	Special Conditions: <u>Demo only</u>
Voting District _____	Ingress / Egress 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).

Applicant Signature [Signature] Date 2/15/06
 Department Approval Gayleen Henderson Date 2-15-06

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>2/15/06</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)