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|------------------------|
| Planning \$ <u>105</u> |
| TCP \$ |
| Drainage \$ |
| SIF\$ |

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

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| BLDG PERMIT NO. |
| FILE # |

Building Address 2415 V-Rd
 Parcel No. 2945-043-00-144
 Subdivision _____
 Filing _____ Block _____ Lot _____

OWNER INFORMATION:

Name Well Fargo
 Address Same
 City / State / Zip GJ CO 81505

APPLICANT INFORMATION:

Name F & I Constructors
 Address Po Box 1767
 City / State / Zip GJ CO. 81502
 Telephone 434 9093

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) _____

DESCRIPTION OF WORK & INTENDED USE:

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

*** FOR CHANGE OF USE:**

* Existing Use: Bank
 * Proposed Use: installing bullet proof glass
 Estimated Remodeling Cost \$ 20,000.00
 Current Fair Market Value of Structure \$ 135,200.

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

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| ZONE <u>C-1</u> | Maximum coverage of lot by structures _____ |
| SETBACKS: Front _____ from property line (PL) | Landscaping/Screening Required: YES _____ NO _____ |
| Side _____ from PL Rear _____ from PL | Parking Requirement _____ |
| Maximum Height of Structure(s) _____ | Special Conditions: _____ |
| Voting District _____ | Ingress / Egress Location Approval _____ (Engineer's Initials) |

DATE
APR 11 2006

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 Ed Simon Date 4-11-06
 Department Approval Larry Valdes Date 4-11-06

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| Additional water and/or sewer tap fee(s) are required: YES <input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/> W/O No. _____ |
| Utility Accounting <u>(Bennley)</u> Date <u>4/11/06</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)