

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

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

BLDG PERMIT NO.
FILE #

Building Address 714 NOIAND AVE  
Parcel No. 2945-231-15-019  
Subdivision Benton Canon  
Filing \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Multifamily Only:  
No. of Existing Units 2 No. Proposed 2  
Sq. Ft. of Existing 8872 Sq. Ft. Proposed 8872  
Sq. Ft. of Lot / Parcel 12,500  
Sq. Ft. Coverage of Lot by Structures & Impervious Surface  
(Total Existing & Proposed) \_\_\_\_\_

**OWNER INFORMATION:**

Name Heilig & Kucel Inc.  
Address 629 1/2 HUDSON BAY DR.  
City / State / Zip GRAND JCT CO. 81504

**DESCRIPTION OF WORK & INTENDED USE:**

Remodel  Addition  
 Change of Use (\*Specify uses below)  
 Other: BATH ROOM

**APPLICANT INFORMATION:**

Name Tom Heilig DBA T&R CONST.  
Address 237 W. 1<sup>ST</sup> STREET.  
City / State / Zip PALISADE CO. 81526.  
Telephone 201 2371

\* FOR CHANGE OF USE:  
\*Existing Use: \_\_\_\_\_  
\*Proposed Use: WAREHOUSE  
Estimated Remodeling Cost \$ 6,500<sup>00</sup>  
Current Fair Market Value of Structure \$ ~~400,000~~  
72,240.00

**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>I-1</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 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 Thomas Heilig Date 5/2/06  
Department Approval [Signature] Date 5/2/06

Additional water and/or sewer tap fee(s) are required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	W/O No. <u>119516</u>
Utility Accounting <u>[Signature]</u>	Date <u>5/2/06</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)