

Planning \$ <u>10⁰⁰</u>
TCP \$
Drainage \$
SIF\$

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Community Development Department

BLDG PERMIT NO.

FILE #

Building Address 744 Noland
 Parcel No. 2945-231-15-029
 Subdivision _____
 Filing _____ Block _____ Lot _____

Multifamily Only:
 No. of Existing Units _____ No. Proposed _____
 Sq. Ft. of Existing 8800 Sq. Ft. Proposed 0
 Sq. Ft. of Lot / Parcel 12,500
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) N/A

OWNER INFORMATION:

Name Heilig & Kuehl 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: _____

APPLICANT INFORMATION:

Name Tom Heilig
 Address 629 1/2 Hudson Bay DR.
 City / State / Zip GRAND JCT CO 81504
 Telephone 2012371

* FOR CHANGE OF USE:
 *Existing Use: WARE HOUSE.
 *Proposed Use: SAME.
 Estimated Remodeling Cost \$ 1,500⁰⁰
 Current Fair Market Value of Structure \$ 350,000.

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 <u>N/A</u>
SETBACKS: Front <u>15/25</u> from property line (PL)	Landscaping/Screening Required: YES _____ NO _____
Side <u>10/10</u> from PL Rear <u>10/10</u> from PL	Parking Requirement _____
Maximum Height of Structure(s) <u>40</u>	Special Conditions: <u>Split Electrical on two businesses in same building</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 5/1/06
 Department Approval Wendy Spurr Date 5/1/06

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

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)