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

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Community Development Department

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|-----------------|
| BLDG PERMIT NO. |
| FILE # |

Building Address 202 North Ave
 Parcel No. 2945-11300-008
 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 Aristar Inc
 Address Box 2404
 City / State / Zip 81502

DESCRIPTION OF WORK & INTENDED USE:

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

APPLICANT INFORMATION:

Name Integrity Contracting
 Address Box 698
 City / State / Zip Frunita 81521
 Telephone 242-9390

* FOR CHANGE OF USE:

*Existing Use: Office
 *Proposed Use: office

Estimated Remodeling Cost \$ 6525.00
 Current Fair Market Value of Structure \$ 87,780.00

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 C-2 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: Remodel
 Voting District _____ Ingress / Egress Location Approval _____
 (Engineer's Initials) only

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 Andrew V. [Signature] Date 2-24-06
 Department Approval [Signature] Date 2/24/06

| | | | |
|--|-------------------------|----|---------------------|
| Additional water and/or sewer tap fee(s) are required: | YES | NO | W/O No. |
| Utility Accounting | <u>Kate [Signature]</u> | | Date <u>2/24/06</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)