

Planning \$	5.00
TCP \$	/
Drainage \$	/
SIF \$	/

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Community Development Department

BLDG PERMIT NO. _____

FILE # _____

89007-4340

Building Address 1702 North Ave

Parcel No. 2945-123-25-018

Subdivision /

Filing _____ Block _____ Lot _____

OWNER INFORMATION:

Name David Ungaro

Address 1941 Frontage Rd

City / State / Zip Fruita, CO 81521

APPLICANT INFORMATION:

Name David Ungaro

Address 1941 Frontage Rd

City / State / Zip Fruita, CO 81521

Telephone 970-260-4288

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: Interior Remodel

*** FOR CHANGE OF USE:**

*Existing Use: _____

*Proposed Use: _____

Estimated Remodeling Cost \$ 2,000⁰⁰/₁₀₀

Current Fair Market Value of Structure \$ 63,150

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-1

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)

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 12-12-06

Department Approval Judith A. Price Date 12/12/06

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>NO charges/ sewer/water</u>
Utility Accounting <u>[Signature]</u>	Date <u>12-12-06</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)