

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

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Community Development Department

BLDG PERMIT NO.

FILE #

184 EOD
105031-4399 105032-4514 9.2

Building Address 216 N Ave & 1154 N 2nd

Parcel No. 2945-113-00-004 & 008

Subdivision _____

Filing _____ Block _____ Lot _____

OWNER INFORMATION:

Name Airstar, Inc. Jeffrey Williams

Address P.O. Box 2404

City / State / Zip GJ 81502

APPLICANT INFORMATION:

Name Jeffrey Williams

Address 216 N. Ave #8

City / State / Zip GJ

Telephone 263-0900

Multifamily Only:
No. of Existing Units _____ No. Proposed _____

Sq. Ft. of Existing 4516 Sq. Ft. Proposed 4516

Sq. Ft. of Lot / Parcel .402 Acres

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: Car wash / office

*Proposed Use: Same

Estimated Remodeling Cost \$ 50,000

Current Fair Market Value of Structure \$ 750,000
~~131,790.00~~

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 X

Side _____ from PL Rear _____ from PL Parking Requirement N/A

Maximum Height of Structure(s) _____ Special Conditions: Exterior remedial only

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 6-22-06

Department Approval [Signature] Date 6/22/06

| | | | |
|--|--------------------|-------------|-------------------------------|
| Additional water and/or sewer tap fee(s) are required: | YES | NO <u>X</u> | W/O No. <u>Nothing in the</u> |
| Utility Accounting | <u>[Signature]</u> | | Date <u>6/22/06</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)

