Planning \$	5.00	
TCP\$	Ø	
Drainage \$	Ø	
SIF\$	6	

(Multifamily & Nonresidential Remodels and Change of Use)

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BLDG PERMIT NO.	
FILE#	

Building Address <u>2881 North Ave</u>	Multifamily Only:	No Dropped
Parcel No. 2943-181-15-001	No. of Existing Units	
Subdivision	Sq. Ft. of Existing	Sq. Ft. Proposed
	Sq. Ft. of Lot / Parcel	
Filing Block Lot	Sq. Ft. Coverage of Lot by Struc	•
OWNER INFORMATION:	(Total Existing & Proposed)	
Name WAL-MART	DESCRIPTION OF WORK & IN	,
Address 2881 North Ave	Remodel Change of Use (*Specify uses b	Addition pelow)
City/State/Zip Grand Junction Co,	Other:	
APPLICANT INFORMATION:	* FOR CHANGE OF USE:	
Name Vogel Plby INC.	*Existing Use:	
. •	*Proposed Use: INTERIOR NEW PAINT MEN INTERIOR	Renovations
Address 603 school ST	NEW PAINT, NEW INTE	NON COLORS
City / State / Zip <u>Hi //Sburo</u> <u>TL. 62049</u>	Bid 2 offices Estimated Remodeling Cost \$_	<u>931,800.00</u>
Telephone 217-532-6639	Current Fair Market Value of Str	
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all exproperty lines, ingress/egress to the property, driveway locatio		
THIS SECTION TO BE COMPLETED BY COMM	MUNITY DEVELOPMENT DEPAR	RTMENT STAFF
ZONE C-1	Maximum coverage of lot by str	uctures
SETBACKS: Front from property line (PL)	Landscaping/Screening Require	ed: YESNO N /A
Side from PL Rear from PL Maximum Height of Structure(s)	Parking Requirement N/A	
Maximum Height of Structure(s)	Special Conditions: Laterro	in Remodel only
Ingress / Egress		
Voting District Location Approval		773
(Engineer's Initials)	in writing by the Community Day	volonment Department. The
Modifications to this Planning Clearance must be approved, structure authorized by this application cannot be occupied u Occupancy has been issued, if applicable, by the Building De	ntil a final inspection has been co	mpleted and a Certificate of
I hereby acknowledge that I have read this application and the	information is correct: I agree to co	omply with any and all codes.
ordinances, laws, regulations or restrictions which apply to the	project. I understand that failure	
action, which may include but not necessarily be limited to no	_	
Applicant Signature <u>Heritary // 1034</u>	Date	6-06
Department Approval 9 Jayle Hender	Date <u>3 5 - 70</u>	6-06
Additional water and/or sewer tap fee(s) are required: YES	S NO	
Utility Accounting Clausley	Date 5/17/	No
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Sec (White: Planning) (Yellow: Customer) (Pink:		ng & Development Code) oldenrod: Utility Accounting)