

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

PLANNING CLEARANCE
 (Multifamily & Nonresidential Remodels and Change of Use)
Community Development Department

BLDG PERMIT NO.
FILE #

UNIT CTD TENANT FINISH

Building Address 2681 UNAWEEP AVE
 Parcel No. 2945-261-04-004
 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 GEORGE CHAC
 Address 2851 PICARDY DR.
 City / State / Zip G-J CO 81501

DESCRIPTION OF WORK & INTENDED USE:

Remodel Addition
 Change of Use (*Specify uses below)
 Other: TENANT FINISH LIQUOR STORE.

APPLICANT INFORMATION:

Name EXTREME CONST
 Address 2791 SKYLINE CT.
 City / State / Zip G-J CO 81506
 Telephone 255-8116

* FOR CHANGE OF USE:
 *Existing Use: New building
 *Proposed Use: Liquor store
 Estimated Remodeling Cost \$ 15,000
 Current Fair Market Value of Structure \$ New building

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>C-1</u>	Maximum coverage of lot by structures _____
SETBACKS: Front <u>15'</u> from property line (PL)	Landscaping/Screening Required: YES _____ NO <u>X</u>
Side <u>0'</u> from PL Rear <u>10'</u> from PL	Parking Requirement <u>N/A</u>
Maximum Height of Structure(s) _____	Special Conditions: <u>Interior remodel only</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 Mr. A. [Signature] Date 3/20/06
 Department Approval [Signature] Date 3/20/06

Additional water and/or sewer tap fee(s) are required:	YES	NO <u>X</u>	W/O No. _____
Utility Accounting <u>[Signature]</u>	Date	<u>3/21/06</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)