Planning \$ 5.00 PLANNING C TCP \$ (Multifamily & Nonresidential Ber	
I CP \$ (Multifamily & Nonresidential Rer Drainage \$ Community Develo	
SIF\$	11614-7203
	11619=7205
Building Address 2021 N 12Th STREET	Multifamily Only: No. of Existing Units No. Proposed
Parcel No. 2945 - 111 - 00 971	Sq. Ft. of Existing 430.5 Sq. Ft. Proposed 430.5
Subdivision	Sq. Ft. of Lot / Parcel
Filing Block Lot	Sq. Ft. Coverage of Lot by Structures & Impervious Surface
OWNER INFORMATION:	(Total Existing & Proposed)
Name COMMUNITY HOSPITAL	DESCRIPTION OF WORK & INTENDED USE:
Address 2021 N. 12th STREET	Remodel Addition Change of Use (*Specify uses below)
City/State/Zip GRAND JUNETION CO	Other:
81501	* FOR CHANGE OF USE:
APPLICANT INFORMATION:	*Existing Use: OFFICE
Name WCS WhITTAKE	*Proposed Use: OFFICE
Address <u>SAME AS Above</u>	
City / State / Zip	Estimated Remodeling Cost \$ 6,500
Telephone 250 - U248	Current Fair Market Value of Structure \$ 4 3118, 1050
REQUIRED: One plot plan, on 8 1/2" x 11" paper, showing all e	xisting & 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	
Pr	
ZONE <u> </u>	Maximum coverage of lot by structures
SETBACKS: Front from property line (PL)	Landscaping/Screening Required: YES_X_NO
Side from PL from PL	Parking Requirement
Maximum Height of Structure(s)	Special Conditions: <u></u>
Ingress / Egress	
Voting District Location Approval (Engineer's Initials	$\frac{\partial n}{\partial t}$
	, in writing, by the Community Development Department. The until a final inspection has been completed and a Certificate of
Occupancy has been issued, if applicable, by the Building De	
	information is correct; I agree to comply with any and all codes,
ordinances, laws, regulations or restrictions which apply to the action, which may include but not necessarily be limited to not	e project. I understand that failure to comply shall result in legal
Applicant Signature 21.10,21 bits	Date 3/12/07
1 Khd : Anna	
Department Approval	Date $3//2/07$
Additional water and/or sewer tap fee(s) are required: YE	
Utility Accounting	Date <u>5</u> +2-0)

(White: Planning)

(Yellow: Customer)

ICE (Section 2.2.C.1 Grand Jur (Pink: Building Department) Coning & Development Code) (Goldenrod:-Utility Accounting)