

Planning \$	0 6993.75
TCP \$	5,143.75
Drainage \$	5,815.00
SIF \$	0

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

BLDG PERMIT NO. _____
 FILE # SPR-2006-323

Building Address 596 23 1/2 ROAD
 Parcel No. 2945-081-00-113
 Subdivision _____
 Filing _____ Block _____ Lot _____

Multifamily Only:
 No. of Existing Units 0 No. Proposed 1
 Sq. Ft. of Existing 0 Sq. Ft. Proposed 6250
 Sq. Ft. of Lot / Parcel +/- 5.92 ACRES
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name REDLANDS PARKWAY LLC
 Address PO Box 4150
 City / State / Zip GRAND JUNCTION, CO 81502

DESCRIPTION OF WORK & INTENDED USE:

- Remodel Addition
- Change of Use (*Specify uses below)
- Other: _____

APPLICANT INFORMATION:

Name TOM FOLKESTAD
 Address PO Box 730
 City / State / Zip FRUITA, CO 81521
 Telephone 970-210-6474

* FOR CHANGE OF USE:
 *Existing Use: Building w/ associated parking, landscaped
 *Proposed Use: new industrial

Estimated Remodeling Cost \$ _____
 Current Fair Market Value of Structure \$ _____

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>I-1</u>	Maximum coverage of lot by structures <u>N/A</u>
SETBACKS: Front <u>15</u> from property line (PL)	Landscaping/Screening Required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Side <u>5</u> from PL Rear <u>10</u> from PL	Parking Requirement <u>per plans</u>
Maximum Height of Structure(s) <u>40'</u>	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 Tom Folkestad Date 8/4/06
 Department Approval Ken Krauch Date 4/27/2007

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>20194</u>
Utility Accounting <u>[Signature]</u>	Date <u>4/27/07</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)

ELEVATION CERTIFICATE RECEIVED

MB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages **JAN 30 2007**

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>REDLANDS PARKWAY LLC</u>		For Insurance Company Use: Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>596 23 1/2 ROAD</u>		Company NAIC Number	
City <u>GRAND JUNCTION</u>	State <u>CO</u>	ZIP Code <u>81503</u>	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>2945-081-00-113</u>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>INDUSTRIAL</u>			
A5. Latitude/Longitude: Lat. <u>39° 05' 23" N</u> Long. <u>108° 36' 48" W</u>		Horizontal Datum: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7. Building Diagram Number <u>1</u>			
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:	
a) Square footage of crawl space or enclosure(s) _____ sq ft	b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____	a) Square footage of attached garage _____ sq ft	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>MESA COUNTY - 090115</u>		B2. County Name <u>MESA</u>		B3. State <u>COLORADO</u>	
B4. Map/Panel Number <u>080115-0460</u>	B5. Suffix <u>B</u>	B6. FIRM Index Date <u>JULY 15, 1992</u>	B7. FIRM Panel Effective/Revised Date <u>JULY 2, 1978 / JULY 15, 1992</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>4535.80</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date <u>NA</u> <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, ARIA/AE, ARIA1-A30, ARIA/H, ARIA/O. Complete Items C2.a-g below according to the building diagram specified in Item A7.

Benchmark Utilized SE PROPERTY CORNER Vertical Datum ELEVATION = 4535.82 (NAVD 1988)

Conversion/Comments BFE ⇒ 4535.80 (NGVD 1929) = 4539.05 (NAVD 1988)

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>4540.05</u> feet	<input checked="" type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
b) Top of the next higher floor	<u>NA</u> feet	<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>NA</u> feet	<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>NA</u> feet	<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>NA</u> feet	<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>NA</u> feet	<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>NA</u> feet	<input type="checkbox"/>	feet	<input type="checkbox"/>	meters (Puerto Rico only)

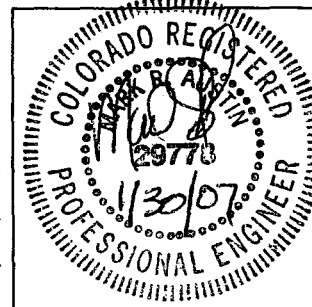
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

MARK AUSTIN

Certifier's Name	<u>AUSTIN CIVIL GROUP, INC.</u>	License Number	
Title	<u>336 MAIN ST. SUITE 203</u>	Company Name	<u>GRAND JUNCTION</u>
Address	City	State	ZIP Code
		<u>CO</u>	<u>81501</u>
Signature	Date	Telephone	



IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 596 23 1/2 ROAD			Policy Number	
City GRAND JUNCTION	State CO	ZIP Code 81507	Company NAIC Number	

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature _____ Date _____ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the HAG.
 b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.

E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name
AUSTIN CIVIL GROUP, INC.

Address 376 MAIN ST. SUITE 203 City GRAND JUNCTION State CO ZIP Code 81501

Signature [Signature] Date 1/2/07 Telephone 242-7540

Comments

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8. and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number 2006-323	G5. Date Permit Issued 2-12-07	G6. Date Certificate Of Compliance/Occupancy Issued
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

Local Official's Name RICK DORRIS Title DEVEL. ENGR.

Community Name CITY OF GRAND JCT. CO Telephone 970-256-4034

Signature [Signature] Date 2-12-06

Comments

Check here if attachments

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

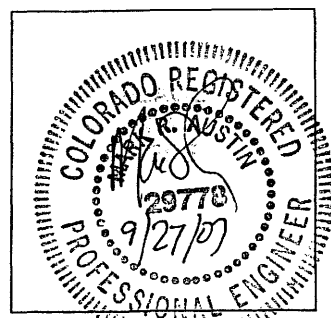
Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name <u>REDLANDS PARKWAY LLC</u>		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>596 23 1/2 ROAD</u>		Company NAIC Number
City <u>GRAND JUNCTION</u>	State <u>CO</u>	ZIP Code <u>81503</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>2945-081-00-013</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>INDUSTRIAL</u>		
A5. Latitude/Longitude: Lat. <u>39° 5' 23" N</u> Long. <u>108° 36' 48" W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>1</u>		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number <u>08015</u>		B2. County Name <u>MESA</u>		B3. State <u>CO</u>	
B4. Map/Panel Number <u>0460</u>	B5. Suffix <u>B</u>	B6. FIRM Index Date <u>7/15/92</u>	B7. FIRM Panel Effective/Revised Date <u>7/3/78 7/15/92</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>4535.80</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction *A new Elevation Certificate will be required when construction of the building is complete.	
C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7.	
Benchmark Utilized <u>SE PROPERTY CORNER</u>	Vertical Datum <u>4535.42 (NAVD 88)</u>
Conversion/Comments <u>BFE -> 4535.80 (NGVD 29) = 4539.05 (NAVD 88)</u>	
Check the measurement used.	
a) Top of bottom floor (including basement, crawl space, or enclosure floor) <u>4540.05</u> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor _____ <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) _____ <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) _____ <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) _____ <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG) _____ <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG) _____ <input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION			
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.			
<input type="checkbox"/> Check here if comments are provided on back of form.			
Certifier's Name <u>MARK AUSTIN</u>	<u>29778</u>	License Number	
<u>OWNER</u>	<u>AUSTIN CIVIL GROUP</u>	Company Name	
Title <u>336 MAIN ST. SUITE 207</u>	<u>GJ.</u>	<u>CO</u>	<u>81501</u>
Address	City	State	ZIP Code
Signature <u>[Signature]</u>	Date <u>9/27/07</u>	Telephone <u>242-7543</u>	



IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>596 23 1/2 ROAD</u>			Policy Number	
City <u>GRAND JUNCTION</u>	State <u>CO</u>	ZIP Code <u>81503</u>	Company NAIC Number	

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments

Signature

Date

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the HAG.
- b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8. and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

Local Official's Name <u>RICK DORRIS</u>	Title <u>DEVEL ENGR</u>
Community Name <u>CITY OF GT CO</u>	Telephone <u>970-256-4034</u>
Signature <u>Rick Dorris</u>	Date <u>12-10-08</u>
Comments	

Check here if attachments