

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

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Community Development Department

BLDG PERMIT NO.
FILE #

Building Address 607 25 RD SUITE 1-B
 Parcel No. 2945-044-14-004
 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 SUN PLEX LLC
 Address PO Box 2829
 City / State / Zip GRAND JCT CO. 81502

DESCRIPTION OF WORK & INTENDED USE:
 Remodel Addition
 Change of Use (*Specify uses below)
 Other: tenant refinish, oral surgery office

APPLICANT INFORMATION:

Name SUN KING MNGT. CORP.
 Address PO Box 3299
 City / State / Zip GJT CO 81502
 Telephone 970-245-9173

* FOR CHANGE OF USE:
 *Existing Use: _____
 *Proposed Use: _____

Estimated Remodeling Cost \$ 210,000
 Current Fair Market Value of Structure \$ not awarded w/ new co. address

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 _____ from property line (PL)	Landscaping/Screening Required: YES _____ NO _____
Side _____ from PL Rear _____ from PL	Parking Requirement _____
Maximum Height of Structure(s) _____	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 [Signature] Date 6-13-07
 Department Approval Judith A. Ryan Date 6/14/07 TEQL

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No. <u>Prem 64202</u>
Utility Accounting <u>Cate Elobeny</u>	Date <u>6/14/07</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)