

Planning \$	0
TCP \$	24,689.00
Drainage \$	8,031.57
SIF \$	

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

BLDG PERMIT NO.	
FILE #	ANX-2007-035

107004-61262

Building Address 356 27^{1/2} ROAD
 Parcel No. 2945-241-00-216
 Subdivision N/A
 Filing _____ Block _____ Lot _____

Multifamily Only:
 No. of Existing Units 1 No. Proposed 1
 Sq. Ft. of Existing 3515 Sq. Ft. Proposed 8,400
 Sq. Ft. of Lot / Parcel 151,253
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) 27,181

OWNER INFORMATION:

Name SLB Enterprises
 Address PO Box 1874
 City / State / Zip Vernal Utah 84078

DESCRIPTION OF WORK & INTENDED USE:

Remodel Addition
 Change of Use (*Specify uses below) \$ temp trailer
 Other: NEW CONSTRUCTION OF OFFICE/WAREHOUSE
Trucking Company - New Building
FOR CHANGE OF USE:

APPLICANT INFORMATION:

Name Russ Justice
 Address 601 Silver Plume
 City / State / Zip Huita Co 81521
 Telephone 970-263-8791

*Existing Use: same N/A less than 20 employees
 *Proposed Use: N/A
 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>NA</u>
SETBACKS: Front <u>15'</u> from property line (PL)	Landscaping/Screening Required: YES <u>X</u> NO _____
Side <u>5</u> from PL Rear <u>10</u> from PL	Parking Requirement <u>Per Plan</u>
Maximum Height of Structure(s) <u>40</u>	Special Conditions: <u>No C.O. until all improvements completed or DIA & guarantee executed - temp trailer to be removed</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 Russ Justice Date 12-12-06

Department Approval [Signature] Date 8/7/07

Additional water and/or sewer tap fee(s) are required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> W/O No. <u>20523</u>
Utility Accounting <u>[Signature]</u> Date <u>8/7/07</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)

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name SLB Enterprises		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. 356 27 1/2 Road		Company NAIC Number
City Grand Jct	State CO	ZIP Code 81501
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel# 2945-241-00-216		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Commercial Industrial</u>		
A5. Latitude/Longitude: Lat. <u>39 degrees 03' 20.30316</u> Long. <u>108 degrees 32' 01.4515</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 _____		
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 Mesa County		B2. County Name Mesa		B3. State CO	
B4. Map/Panel Number 0801150470	B5. Suffix B	B6. FIRM Index Date July 15, 1992	B7. FIRM Panel Effective/Revised Date Loma July 26, 2000	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 4576.0 (NAD 1929) 4579.25 (NAD 1988)
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: 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, 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 (1) Vertical Datum 1988
Conversion/Comments 1988 Datum = 1929 Datum + 3.25 ft. (1) AI cap at C 1/2 and 27 1/2 roads, el 4576.23
Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor) 4580.50 feet meters (Puerto Rico only)

b) Top of the next higher floor _____ feet meters (Puerto Rico only)

c) Bottom of the lowest horizontal structural member (V Zones only) _____ feet meters (Puerto Rico only)

d) Attached garage (top of slab) _____ feet meters (Puerto Rico only)

e) Lowest elevation of machinery or equipment servicing the building 4580.50 feet meters (Puerto Rico only)
(Describe type of equipment in Comments)

f) Lowest adjacent (finished) grade (LAG) _____ feet meters (Puerto Rico only)

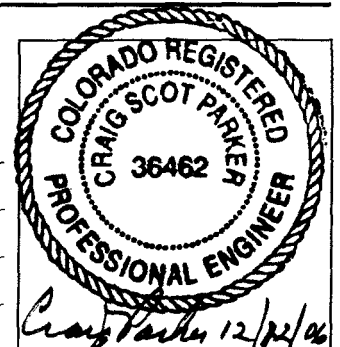
g) Highest adjacent (finished) grade (HAG) _____ feet meters (Puerto Rico only)

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.

Certifier's Name Craig S. Parker	License Number CO 36462
Title Civil Engineer	Company Name Vortex Engineering, Inc.
Address 255 Vista Valley Dr.	City Fruita State Co ZIP Code 81521
Signature <i>Craig Parker</i>	Date 12/7/06 Telephone (970)245-9051



IMPORTANT: In these spaces, copy the responding 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. 356 27 1/2 Road	Policy Number
City Grand Junction State CO ZIP Code 81501	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 12/7/06

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 N/A 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

N/A

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
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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

Title

Community Name

Telephone

Signature

Date

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

A1. Building Owner's Name <u>SLB Enterprises</u>		For Insurance Company Use:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>356 27 1/2 Road</u>		Policy Number	
City <u>Grand Jct</u>		State <u>Colorado</u>	ZIP Code <u>81501</u>
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>2945-241-00-216</u>			
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>NON-RESIDENTIAL</u>			
A5. Latitude/Longitude: Lat. <u>39 degrees 03'20.30316</u> Long. <u>-108 degrees</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" 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 _____			
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</u>		B2. County Name <u>Mesa</u>		B3. State <u>Colorado</u>	
B4. Map/Panel Number <u>0801150470</u>	B5. Suffix <u>8</u>	B6. FIRM Index Date <u>July 15, 1992</u>	B7. FIRM Panel Effective/Revised Date <u>Loma 7/26/2000</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>4576. (NAD 1929)</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) _____					<u>4579.25 (NAD 1988)</u>
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: 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, 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 (1) Vertical Datum 1988
Conversion/Comments 1988 Datum=1929Datum+3.25Ft. (1) Al cap at C 1/2 and 27 1/2 Roads, el 4576.2

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>4580.48</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)	<u>4580.48</u> <input checked="" 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.

Check here if comments are provided on back of form.

Robert W. Jones, II CO 37505
 Certifier's Name License Number
Civil Engineer Vortex Engineering, Inc
 Title Company Name
255 Vista Valley Drive Fruita, CO 81521
 Address City State ZIP Code
Robert W. Jones 2-17-09 970-245-9051
 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. 356 27 1/2 Road			Policy Number
City Grand Junction	State CO	ZIP Code 81501	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

Ralph W. Jones
Signature

2-17-09
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 N/A. 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

N/A

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 _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments

Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.			For Insurance Company Use:
			Policy Number
City	State	ZIP Code	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.