

Planning \$	—
TCP \$	1589 x 2
Drainage \$	NA
SIF \$	NA

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

BLDG PERMIT NO.
FILE # PP-2006-250

Building Address ~~1705 Hermosa I+J~~ 1705 Hermosa I+J
 Parcel No. 2945-013-19-001
 Subdivision Hilltop Commons
 Filing _____ Block _____ Lot _____

OWNER INFORMATION:

Name Hilltop Health Services Corp.
 Address 1331 Hermosa Avenue
 City / State / Zip Grand Junction, Co 81506

APPLICANT INFORMATION:

Name Hilltop Health Services Corp.
 Address 1331 Hermosa Avenue
 City / State / Zip Grand Junction, CO 81506
 Telephone 970-242-4400

Multifamily Only:
 No. of Existing Units _____⁰ No. Proposed 1
 Sq. Ft. of Existing 0 Sq. Ft. Proposed 3000 Duplex
 Sq. Ft. of Lot / Parcel 3.8 acres for 9 duplexes
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) 0 / 53,800 SF

DESCRIPTION OF WORK & INTENDED USE:

Remodel Addition
 Change of Use (*Specify uses below)
 Other: New Duplex

*** FOR CHANGE OF USE:**

*Existing Use: Vacant Lot
 *Proposed Use: Assis. Living Duplexes

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 PP Maximum coverage of lot by structures _____
 SETBACKS: Front 20 from property line (PL) Landscaping/Screening Required: YES X NO _____
 Side 5 from PL Rear 10 from PL Parking Requirement 2 per unit
 Maximum Height of Structure(s) 35 Special Conditions: _____
 Ingress / Egress
 Voting District _____ 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 2-15-07

Department Approval [Signature] Date 3/27/07

Additional water and/or sewer tap fee(s) are required:	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	W/O No. <u>50085</u>
Utility Accounting	<u>[Signature]</u>		Date <u>3/29/07</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)