

Planning \$	5.00
TCP \$	0
Drainage \$	0
SIF\$	0

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Community Development Department

BLDG PERMIT NO. _____

FILE # _____

Units 101 + 102

Building Address 2650 NORTH AVE
 Parcel No. 2945-124-00-022
 Subdivision Redcliff Point
 Filing _____ Block _____ Lot _____

OWNER INFORMATION:

Name COMFORT DENTAL
 Address 2650 North
 City / State / Zip Grand Junction

APPLICANT INFORMATION:

Name COMFORT DENTAL
 Address 9990 W 26th
 City / State / Zip LAKEWOOD CO 80215
 Telephone 303 202 9449

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) _____

DESCRIPTION OF WORK & INTENDED USE:

Remodel Addition
 Change of Use (*Specify uses below)
 Other: interior tenant finish - Commercial

*** FOR CHANGE OF USE:**

*Existing Use: _____
 *Proposed Use: _____

Estimated Remodeling Cost \$ 110,000

Current Fair Market Value of Structure \$ 2,726,000.

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 C-1 Maximum coverage of lot by structures _____
 SETBACKS: Front 15' from property line (PL) Landscaping/Screening Required: YES _____ NO _____
 Side 0' from PL Rear 10' from PL Parking Requirement _____
 Maximum Height of Structure(s) _____ 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 2-20-07

Department Approval [Signature] Date 2-20-07

Additional water and/or sewer tap fee(s) are required: YES _____ NO W/O No. perm 5319
 Utility Accounting [Signature] Date 2/20/07

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)