TCP\$ ter			Planning \$ 500
Drainage \$	PLANNING CLE		Bldg Permit #
SIF\$	(Multifamily & Nonresidential Remode		File #
Inspection \$			
Building Address Parcel No. 2945 -	Dimnison Ave Dimnison Ave 132-00-945 SombisAddition Sombis	ultifamily Only: b. of Existing Units p. Ft. of Existing p. Ft. of Lot / Parcel p. Ft. Coverage of Lot for the coverage of Lot for coverage of Lot for coverage of Lot for the coverage of Lot fo	by Structures & Impervious Surface red) <u>AD (Hange</u> RK & INTENDED USE: Change of Use (*Specify uses below) Change of Business Change of Business
	•	stimated Remodeling (Cost \$ 0 7 2
Telephone <u>970 464 1242</u>		Current Fair Market Value of Structure \$ <u>2,424,760</u>	
	on 8 1/2" x 11" paper, showing all existi ss to the property, driveway location &	ng & proposed structu	re location(s), parking, setbacks to all
	THIS SECTION TO BE COMPLET	ED BY PLANNING S	TAFF
ZONE <u>CSR</u>	Mi	aximum coverage of Ic	ot by structures/A
SETBACKS: Front 1512 from property line (PL)		Landscaping/Screening Required: YESNO $_$	
Side <u>10</u> <u>5</u> from PL Rear <u>3</u> from PL		Parking Requirement Some	
Aaximum Height of Structu	ure(s) <u>65</u> Fl	oodplain Certificate Re	equired: YES NO _X
/oting District	Ingress / Egress Sr Location Approval	pecial Conditions:	
Modifications to this Plann	ing Clearance must be approved, in v	vriting, by the Public V	Vorks & Planning Department. The

Modifications to this Planning Clearance must be approved, in writing, by the Public Works & Planning 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.

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	Date Ac 9. 2008
Planning Approva Mclee Bayleen Herden-	Date 12/9/2008
Additional water and/or sewer tap fee(s) are required: YES	NO X W/O No. no weter E enerousters
Utility Accounting	Date 12 9 6
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2	C.4 Grand Junction Zoning & Development Code)

 VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.4 Grand Junction Zoning & Development Code)

 (White: Planning)
 (Yellow: Customer)
 (Pink: Building Department)
 (Goldenrod: Utility Accounting)