

Planning \$	10.00
TCP \$	/
Drainage \$	/
SIF \$	/

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works and Planning Department

SINGLE FAMILY

BLDG PERMIT NO.	/
FILE #	/

Building Address 2517 PIERCE AVE
 Parcel No. 2945-032-90-009
 Subdivision COLONIAL HEIGHTS
 Filing _____ Block _____ Lot _____

Multifamily Only: _____
 No. of Existing Units 1 No. Proposed 1
 Sq. Ft. of Existing 1514 Sq. Ft. Proposed 2250
 Sq. Ft. of Lot / Parcel 6547 15x15'
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name SUSAN D. SCHRODER
 Address 2517 PIERCE AVE.
 City / State / Zip GRD. JCTN, CO. 81505

DESCRIPTION OF WORK & INTENDED USE:

<input type="checkbox"/> Remodel	<input type="checkbox"/> Change of Use (*Specify uses below)
<input type="checkbox"/> Addition	<input type="checkbox"/> Change of Business
<input checked="" type="checkbox"/> Other: <u>ARBOR / 15' x 15'</u> <u>open patio cover</u>	

APPLICANT INFORMATION:

Name SAME
 Address _____
 City / State / Zip _____
 Telephone 970-263-7778

* FOR CHANGE OF USE:

*Existing Use: _____
 *Proposed Use: _____
 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 PLANNING STAFF

ZONE <u>A-5</u> <u>accessory</u>	Maximum coverage of lot by structures <u>60%</u> PAID
SETBACKS: Front <u>25</u> from property line (PL)	Landscaping/Screening Required: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Side <u>3</u> from PL Rear <u>5</u> from PL	Parking Requirement <u>n.a</u>
Maximum Height of Structure(s) <u>35'</u>	Special Conditions: <u>structure must be detached from principal structure to utilize accessory setbacks</u>
Voting District _____	Ingress / Egress Location Approval _____ (Engineer's Initials)

Modifications to this Planning Clearance must be approved, in writing, by the Public Works and 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 (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 04-08-08
 Planning Approval Judith A. [Signature] Date 4/8/08

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No.
Utility Accounting <u>[Signature]</u>	Date <u>4/8/08</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)

