

12

TCP \$
Drainage \$
SIF \$
Inspection \$

Planning \$ 5.00
Bldg Permit #
File #

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

Building Address 905 STRATHENS AVE Multifamily Only: No. of Existing Units _____ No. Proposed _____
 Parcel No. 2945 234 13 002 Sq. Ft. of Existing _____ Sq. Ft. Proposed _____
 Subdivision JEFFREYS SIMPLE SUBDIVISION Sq. Ft. of Lot / Parcel _____
 Filing _____ Block _____ Lot _____ Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____

OWNER INFORMATION:

Name JIM JEFFREYS
 Address 1960 N. 12 TH STREET
 City / State / Zip CO 81501

DESCRIPTION OF WORK & INTENDED USE:

Remodel Change of Use (*Specify uses below)
 Addition Change of Business
 Other: DEMO house

* FOR CHANGE OF USE:

*Existing Use: _____
 *Proposed Use: _____

APPLICANT INFORMATION:

Name FCI CONSTRUCTORS INC
 Address 3070 I-70 B
 City / State / Zip CO 81504
 Telephone 970 434 9098

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 C2 Maximum coverage of lot by structures _____
 SETBACKS: Front _____ from property line (PL) Landscaping/Screening Required: YES _____ NO _____
 Side _____ from PL Rear _____ from PL Parking Requirement _____
 Maximum Height of Structure(s) _____ Floodplain Certificate Required: YES _____ NO _____
 Voting District _____ Ingress / Egress Location Approval _____ Special Conditions: demo only
 (Engineer's Initials)

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 [Signature] Date 12.11.08
 Planning Approval [Signature] Date 12.11.08

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>12/11/08</u>		

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)

PAID
DEC 11 2008
TB