

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

Planning \$ <u>5</u>
Bldg Permit #
File # <u>59764-0</u>

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

Building Address 633 24 Road
 Parcel No. 2945-054-00-071
 Subdivision _____
 Filing _____ Block _____ Lot _____

Multifamily Only:
 No. of Existing Units _____ No. Proposed _____
 Sq. Ft. of Existing _____ Sq. Ft. Proposed _____
 Sq. Ft. of Lot / Parcel 1455
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name Timberline Bank Inc
 Address _____
 City / State / Zip _____

DESCRIPTION OF WORK & INTENDED USE:

Remodel Change of Use (*Specify uses below)
 Addition Change of Business
 Other: eliminate one data room & enlarge electrical room
 * FOR CHANGE OF USE:

APPLICANT INFORMATION:

Name FCL Constructors Inc.
 Address 3070 I-70 B-loop
 City / State / Zip Grand Junction Co 81504
 Telephone (970) 434-9093

*Existing Use: _____
 *Proposed Use: no chg
 Estimated Remodeling Cost \$ 1000
 Current Fair Market Value of Structure \$ Assessor website down

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>C2</u>	Ingress / Egress Location Approval _____ (Engineer's Initials)	Maximum coverage of lot by structures _____	Special Conditions: <u>SPR-0005-115</u>
SETBACKS: Front <u>15/25</u> from property line (PL)		Landscaping/Screening Required: YES _____ NO _____	
Side <u>0/0</u> from PL Rear <u>10/10</u> from PL		Parking Requirement _____	
Maximum Height of Structure(s) <u>40</u>		Floodplain Certificate Required: YES _____ NO _____	
Voting District _____			

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 9/15/09
 Planning Approval [Signature] Date 9/15/09

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>no chg in use</u>
Utility Accounting <u>Marshall Cole</u>	Date <u>9/15/09</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)

Receipt



Copy

9/15/2009 - 2:26:33 PM (CT)

name FCI CONSTRUCTORS/
confirmation number 10008883
effective date 9/15/2009
payment method Credit Card
account number 4XXXX9359

payment amount \$5.00
fee amount \$1.00
total remitted \$6.00

T/R
(34313) - \$5.00

The charge will show on your account as :

CSI City of Grand Junction

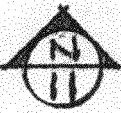
Description of Work to be performed

Timberline Bank 633 24 Rd

- Remove - Bathroom Door, It. Door, toilet, Vanity, Wall Between Bathroom and It. (Elec. Rm)
- Infill - Bathroom Door. and ~~the~~ opening between office 103 and Storage
- Relocate - Bathroom wall sconce to 2x2 drop ceiling drop-in light, Move Horn Strobe to West Wall, All Elec. and low voltage to move as needed
- Abandon - Bathroom light switch - tie old sconce to (Elec Room) switch
Cap off all plumbing and drains below floor in crawl space.

ACCEPTED
ANY CHANGE OF SETBACKS MUST BE
APPROVED BY THE CITY PLANNING DIVISION.
IT IS THE APPLICANT'S RESPONSIBILITY TO
PROPERLY LOCATE AND IDENTIFY
EASEMENTS AND PROPERTY LINES.

3/2" ϕ CONC. FILLED
STW. BALLARDS



SEE PARTIAL PLAN OF
WORKROOM, SHEET # 14

NDOW
DEAD
DRAWER

NIGHT
DEPOSIT

AREA

Remodel 9/14/0

Demo

Fill In

Relocate Ele

Norm. Stab

GLG. BREAK
FLECTED GLG.
DROPPED TO
ERR AREA, SHEET # 12

VERIFY FINAL CHECKS
AND LOCATION W/
OWNER + COORDINATE
TILE COLOR PATTERN

VEHICLE COVERED

ENTRY

