

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

Planning \$ <u>5,00</u>
Bldg Permit #
File #

Ref # 39468-0

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

Building Address 627 25 1/2 Road
 Parcel No. 2945-033-86-001
 Subdivision RMO Office Development
 Filing _____ Block 1 Lot 1

Multifamily Only:
 No. of Existing Units _____ No. Proposed _____
 Sq. Ft. of Existing 24339 Sq. Ft. Proposed no chg
 Sq. Ft. of Lot / Parcel 203,513
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name SHAW Construction
 Address 760 Horizon Drive
 City / State / Zip GJ, CO 81506
242-9236

DESCRIPTION OF WORK & INTENDED USE:

Remodel Change of Use (*Specify uses below)
 Addition Change of Business
 Other: no mech/plbg - demo some walls & some electrical / Add some walls/door
 * FOR CHANGE OF USE:

APPLICANT INFORMATION:

Name Rocky Mountain Orthopaedic
 Address 627 25 1/2 Road
 City / State / Zip GJ, CO 81505
 Telephone _____

*Existing Use: _____
 *Proposed Use: _____
 Estimated Remodeling Cost \$ 130,00
 Current Fair Market Value of Structure \$ 4,206,920

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>I-0</u>	Maximum coverage of lot by structures <u>N/A</u>		
SETBACKS: Front <u>15/25</u> from property line (PL)	Landscaping/Screening Required: YES _____ NO <u>X</u>		
Side <u>15/15</u> from PL Rear <u>25/25</u> from PL	Parking Requirement <u>no chg</u>		
Maximum Height of Structure(s) <u>40</u>	Floodplain Certificate Required: YES _____ NO <u>X</u>		
Voting District <u>B</u>	Ingress / Egress Location Approval _____	Special Conditions: _____	
	(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 6-23-09
 Planning Approval [Signature] Date 6/23/09

Additional water and/or sewer tap fee(s) are required: YES _____ NO <u>X</u> W/O No. <u>No change</u>
Utility Accounting <u>[Signature]</u> Date <u>6/23/09</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)

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

revised 7/16/09

Planning \$ <u>5,00</u>
Bldg Permit #
File #

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

Ref # 39408-0

Building Address 627 25 1/2 Road
 Parcel No. 2945-033-86-001
 Subdivision RMO Office Development
 Filing _____ Block 1 Lot 1

Multifamily Only
 No. of Existing Units _____ No. Proposed _____
 Sq. Ft. of Existing 24339 Sq. Ft. Proposed no chg
 Sq. Ft. of Lot / Parcel 203,513
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface (Total Existing & Proposed) _____

OWNER INFORMATION:

Name SHAW Construction
 Address 760 Horizon Drive
 City / State / Zip GJ, CO 81506
242-9236

DESCRIPTION OF WORK & INTENDED USE:
 Remodel Change of Use (*Specify uses below)
 Addition Change of Business
 Other: no mech/plbg - demo some walls & some electrical Add some walls/door
 * FOR CHANGE OF USE: plumbing yes, yr
 *Existing Use: (adding hand sinks)
 *Proposed Use: 3 w/ plaster 7/16/09

APPLICANT INFORMATION:

Name Rocky Mountain Orthopaedic
 Address 627 25 1/2 Road
 City / State / Zip GJ, CO 81505
 Telephone _____

Estimated Remodeling Cost \$ 130,00
 Current Fair Market Value of Structure \$ 4,206,920

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 I-0 Maximum coverage of lot by structures N/A
 SETBACKS: Front 15/25 from property line (PL) Landscaping/Screening Required: YES _____ NO X
 Side 15/15 from PL Rear 25/25 from PL Parking Requirement no chg
 Maximum Height of Structure(s) 40 Floodplain Certificate Required: YES _____ NO X
 Voting District B Ingress / Egress Location Approval _____
 (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 6-23-09
 Planning Approval [Signature] Date 6/23/09

Additional water and/or sewer tap fee(s) are required: YES _____ NO X W/O No. No change
 Utility Accounting [Signature] Date 6/23/09

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)