

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

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

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

Building Address 2635 N. 7th St
 Parcel No. 2945-112-00-971
 Subdivision _____
 Filing _____ Block _____ Lot _____

Multifamily Only:
 No. of Existing Units _____ No. Proposed _____
 Sq. Ft. of Existing 166,460 Sq. Ft. Proposed SAME
 Sq. Ft. of Lot / Parcel 521,151
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name Sisters of Charity of
Leavenworth
 Address _____
 City / State / Zip _____

DESCRIPTION OF WORK & INTENDED USE:

Remodel Change of Use (*Specify uses below)
 Addition interior Change of Business
 Other: remodel cardio pulmonary suite
into hyperbaric chamber - no change
 * FOR CHANGE OF USE: to building footprint

APPLICANT INFORMATION:

Name PNCI
 Address 553 25 1/2 Road
 City / State / Zip GRAND JUNCTION 81505
 Telephone 970 242 3548

*Existing Use: _____
 *Proposed Use: _____
 Estimated Remodeling Cost \$ 60,000
 Current Fair Market Value of Structure \$ 72,516,100

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>PD</u>		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 <u>NO</u>	Special Conditions: _____	
	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 RC Wickas Date 9/28/09
 Planning Approval C. Moller Date 9/28/09

Additional water and/or sewer tap fee(s) are required:	YES	NO	W/O No. <u>7585-0</u>
Utility Accounting <u>Manella</u>			Date <u>9/28/09</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)