

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

2492 2945-094-00-061
On Septic System
PLANNING CLEARANCE
 (Multifamily & Nonresidential Remodels and Change of Use)
Public Works & Planning Department

Planning \$	N/C
Bldg Permit #	
File #	

Building Address 2497 Hwy 6+5
 Parcel No. 2945-094-00-060,059,061
 Subdivision Rivensme SUB
 Filing _____ Block _____ Lot _____

Multifamily Only:
 No. of Existing Units 1 No. Proposed _____
 Sq. Ft. of Existing _____ Sq. Ft. Proposed _____
 Sq. Ft. of Lot / Parcel • 361 + • 475 + 1,154
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name SILZELL LILY TRUST
 Address _____
 City / State / Zip _____

DESCRIPTION OF WORK & INTENDED USE:

<input type="checkbox"/> Remodel	<input type="checkbox"/> Change of Use (*Specify uses below)
<input type="checkbox"/> Addition	<input checked="" type="checkbox"/> Change of Business
<input type="checkbox"/> Other: _____	

APPLICANT INFORMATION:

Name ROU Culven
 Address 12817 6100 RD
 City / State / Zip Mantua
 Telephone 970-249-3020

* FOR CHANGE OF USE: STARTS 9/1/09
 *Existing Use: VACANT - PREVIOUSLY TRAILER SALES
 *Proposed Use: TRAILER SALES/STORAGE
 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>C-2</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 Location Approval _____ (Engineer's Initials)
Special Conditions: _____	

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 _____ Date 07/06/09
 Planning Approval [Signature] Date 07/06/09

Additional water and/or sewer tap fee(s) are required:	YES	NO	<u>W/O No. No chg in use</u>
Utility Accounting <u>[Signature]</u>	Date <u>7/6/09</u>		

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.G.4 Grand Junction Zoning & Development Code)
 (White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)