

M

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

Planning \$ <u>5.00</u>
Bldg Permit # <u>/</u>
File # <u>/</u>

### PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

**Public Works & Planning Department**

# 4341-0

Building Address 1660 North Ave  
 Parcel No. 2945 123 25 011  
 Subdivision Park Place Heights  
 Filing \_\_\_\_\_ Block 4 Lot 6

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

**OWNER INFORMATION:**

Name Grand Valley Veterinary Group  
 Address 1660 N. Ave  
 City / State / Zip Grand Jct, Co 81501

DESCRIPTION OF WORK & INTENDED USE:  
 Remodel  Change of Use (\*Specify uses below)  
 Addition  Change of Business  
 Other: Enclose Breezeway

**APPLICANT INFORMATION:**

Name Benchmark CM LLC  
 Address 1959 Broadway  
 City / State / Zip Grand Jct, CO 81503  
 Telephone 970 250-7700

\* FOR CHANGE OF USE: 2 sink Breakroom Utility  
 \*Existing Use: Emergency Vet Clinic  
 \*Proposed Use: Same / no change

Estimated Remodeling Cost \$ 40,000  
 Current Fair Market Value of Structure \$ 250,000

**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-1</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 _____	
	Special Conditions: <u>approved per plan</u>	
	(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 6-9-09  
 Planning Approval Gayleen Henderson Date 6-9-09

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. <u>NO CHANGE</u>
Utility Accounting	Date <u>6-9-09</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)