

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

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

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

3896-0

Building Address 2833 No Ave.
 Parcel No. 2943-182-21-001
 Subdivision Welch Subdivision
 Filing _____ Block _____ Lot 1

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 SONIC DRIVE IN
 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 type="checkbox"/> Change of Business
<input type="checkbox"/> Other: _____	

PAID

* FOR CHANGE OF USE: JUL 24 2009
 *Existing Use: f RB
 *Proposed Use: R & R CANOPY TRIM

APPLICANT INFORMATION:

Name EMERY ATCHISON
 Address 3940 RAPID CK. RD.
 City / State / Zip PALISADE, CO. 81224
 Telephone 261-7285

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 _____	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 _____	Special Conditions: _____
Ingress / Egress Location Approval _____ (Engineer's Initials)	

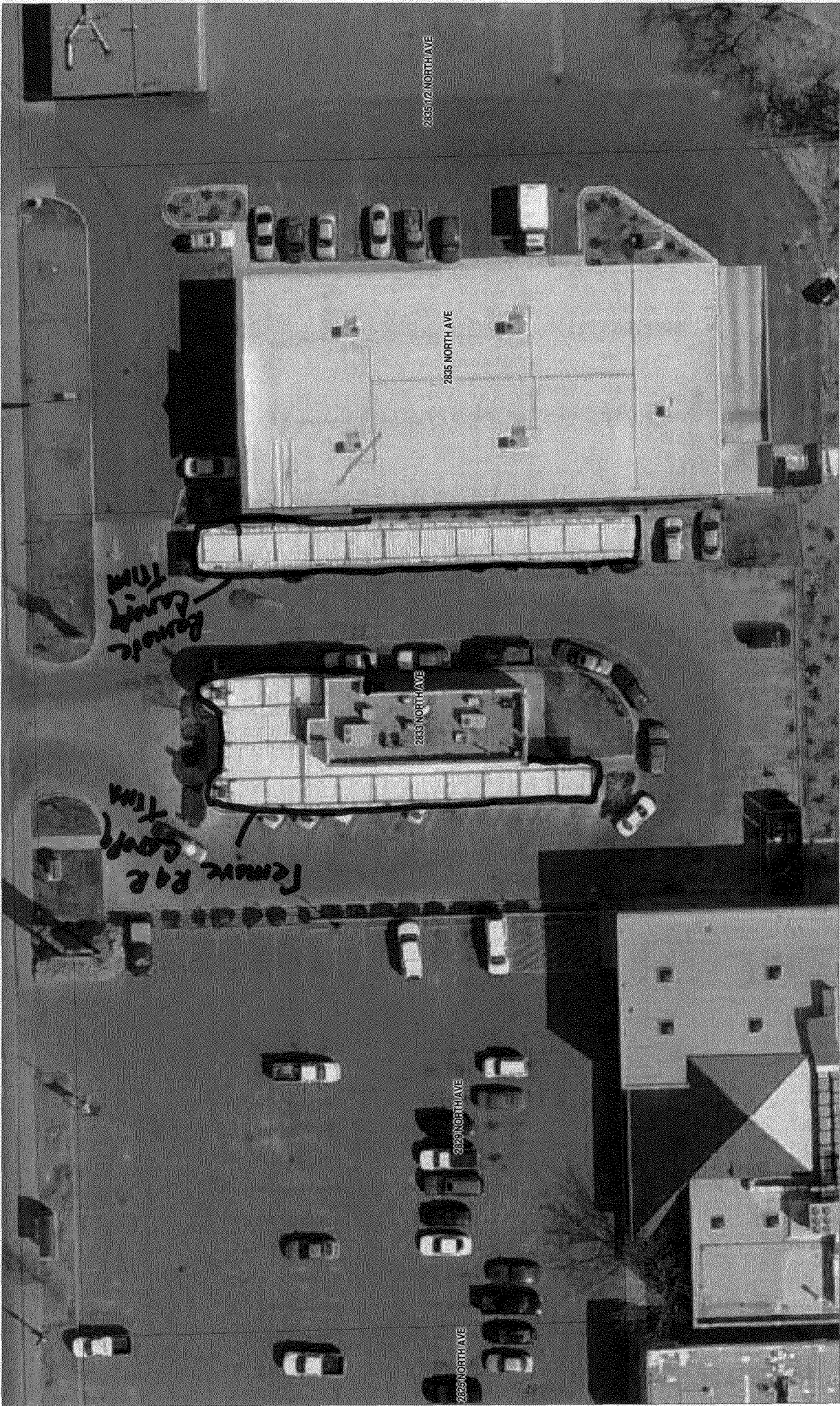
Modifications to this Planning Clearance must be approved, in writing, by the Public Works & Planning Department. The structure authorized by this application cannot be occupied until a final inspection has been completed and a Certificate of Occupancy has been issued, if applicable, by the Building 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 Emery Atchison Date 7/24/09
 Planning Approval Wendy Spurr Date 7/24/09

Additional water and/or sewer tap fee(s) are required:	YES	NO	<input checked="" type="checkbox"/> W/O No. <u>no sewer/water</u>
Utility Accounting <u>R & R</u>	Date <u>7/24/09</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)



2835 1/2 NORTH AVE

2835 NORTH AVE

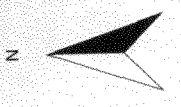
2833 NORTH AVE

2833 NORTH AVE

2835 NORTH AVE

Remix R4E
Remix R4E
TIM

Remix R4E
Remix R4E
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SCALE 1 : 483

