

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

#28981

Planning \$	5.00
Bldg Permit #	
File #	

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

Building Address 2486 Patterson #15
 Parcel No. 2945-044-05-018
 Subdivision Parkwest II Condominiums
 Filing _____ Block _____ Lot 15
 Unit Unit

Multifamily Only:
 No. of Existing Units _____ No. Proposed _____
 Sq. Ft. of Existing 2000 Sq. Ft. Proposed no chg
 Sq. Ft. of Lot / Parcel 102453
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name Mr/Mrs O'Grady
 Address 627 E Pearl Dr
 City / State / Zip Grand Jct CO 81504

DESCRIPTION OF WORK & INTENDED USE:

Remodel Change of Use (*Specify uses below)
 Addition Change of Business
 Other: tenant finish adding 2 walls

* FOR CHANGE OF USE:

*Existing Use: no chg
 *Proposed Use: no chg

APPLICANT INFORMATION:

Name COVENANT HOMES INC
 Address P.O. Box 1921
 City / State / Zip Grand Jct CO 81502
 Telephone (970) 241-7797

Estimated Remodeling Cost \$ 2500
 Current Fair Market Value of Structure \$ 284,000

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 C1 Maximum coverage of lot by structures _____
 SETBACKS: Front 15/25 from property line (PL) Landscaping/Screening Required: YES _____ NO _____
 Side 0/0 from PL Rear 10/10 from PL Parking Requirement _____
 Maximum Height of Structure(s) 40 Floodplain Certificate Required: YES _____ NO _____
 Ingress / Egress _____
 Voting District _____ Location Approval _____
 (Engineer's Initials)

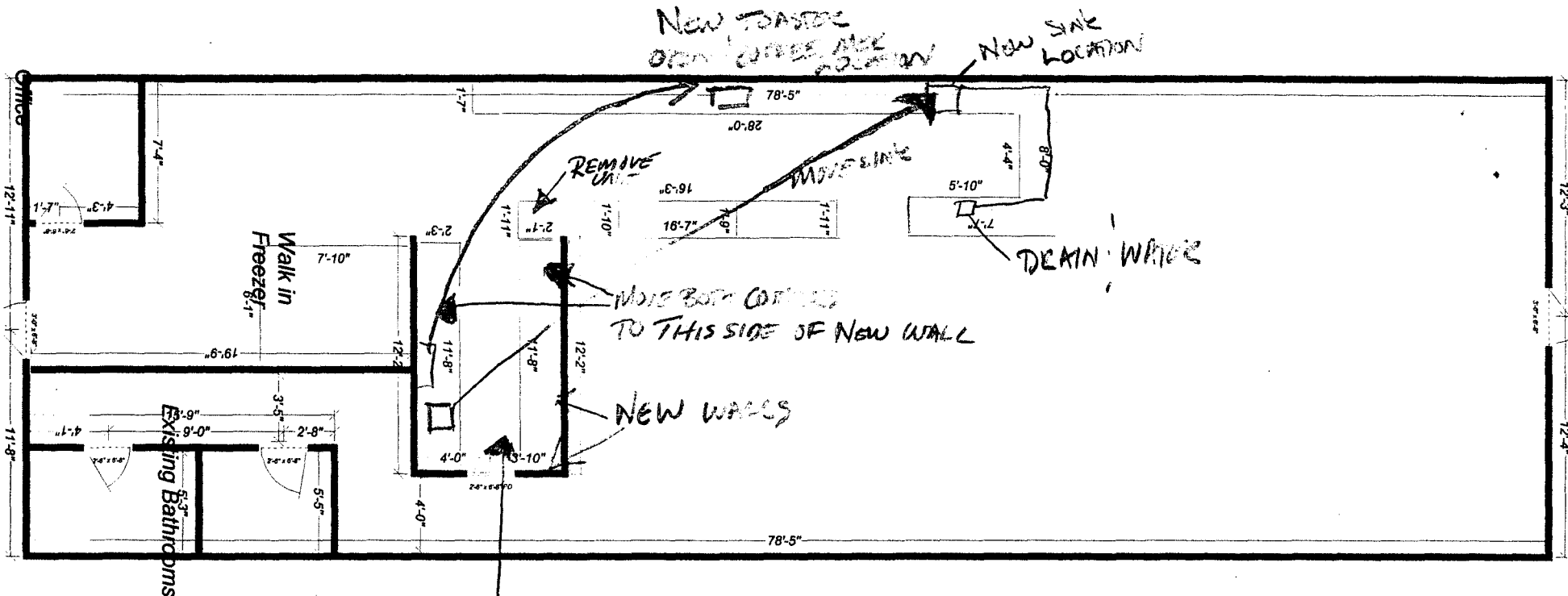
Modifications to this Planning Clearance must be approved, in writing, by the Public Works & Planning Department. The structure authorized by this application cannot be occupied until a final inspection has been completed and a Certificate of Occupancy has been issued, if applicable, by the Building 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 7/16/09
 Planning Approval [Signature] Date 7/16/09

Additional water and/or sewer tap fee(s) are required: YES _____ NO _____ W/O No. tenant finish
 Utility Accounting [Signature] Date 7-16-09

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)



- WIRE FOR FREEZER
- MOVE LIGHTS DOWN AS NEEDEN
- MOVE 220 FOR TOASTER OVER COFFEE MAKERS

ACCEPTED

ANY CHANGE OF SETBACKS MUST BE APPROVED BY THE CITY PLANNING DIVISION

IT IS THE APPLICANT'S RESPONSIBILITY TO PROPERLY LOCATE AND IDENTIFY EASEMENTS AND PROPERTY LINES.