

Planning \$ <u>0</u>	Drainage \$ <u>0</u>
TCP \$ <u>0</u>	School Impact \$
Inspection \$ <u>0</u>	

Permit No. \_\_\_\_\_  
 File # SPR-2009-048

\$ 84.00

57451-0 Inflatables  
 + addl snack rest seat  
 w/ 12 hrs<sup>50</sup>

**PLANNING CLEARANCE**

(site plan review, multi-family development, non-residential development)

Grand Junction Public Works & Planning Department

BUILDING ADDRESS 2469 RIVERSIDE PARKWAY  
 (BANANA'S FUN PARK)  
 SUBDIVISION -  
 FILING \_\_\_\_\_ BLK \_\_\_\_\_ LOT \_\_\_\_\_

TAX SCHEDULE NO. 2945-094-19-002  
 SQ. FT. OF EXISTING BLDG(S) 9,695 ± 4 - 2,835  
 SQ. FT. OF PROPOSED BLDG(S)/ADDITONS 10,000

OWNER BURNS FEC, LLC.  
 ADDRESS 685 MOONRIDGE COURT  
 CITY/STATE/ZIP GRAND JUNCTION, CO 81501

MULTI-FAMILY:  
 NO. OF DWELLING UNITS: BEFORE \_\_\_\_\_ AFTER \_\_\_\_\_  
 CONSTRUCTION  
 NO. OF BLDGS ON PARCEL: BEFORE \_\_\_\_\_ AFTER \_\_\_\_\_  
 CONSTRUCTION

APPLICANT SID SQUIRELL  
 ADDRESS 244 7TH STREET  
 CITY/STATE/ZIP GRAND JUNCTION, CO 81501  
 TELEPHONE 241-2909

USE OF ALL EXISTING BLDG(S) COMMERCIAL  
 DESCRIPTION OF WORK & INTENDED USE: ADD 10,000 SF  
TEXT STRUCTURE TO SITE; SNACKBAR/CONCESSION  
to seat 35-50 PATRONS; REVIEW water  
Cons in 1 year if  
NO dishwasher

Submittal requirements are outlined in the SSID (Submittal Standards for Improvements and Development) document.

THIS SECTION TO BE COMPLETED BY PLANNING STAFF

ZONE <u>I-1</u>	LANDSCAPING/SCREENING REQUIRED: YES <input checked="" type="checkbox"/> NO _____
SETBACKS: FRONT: <u>15/25</u> from Property Line (PL) or from center of ROW, whichever is greater SIDE: <u>5/5</u> from PL REAR: <u>10/10</u> from PL	PARKING REQUIREMENT: <u>per previous approval</u>
MAX. HEIGHT <u>40'</u>	FLOODPLAIN CERTIFICATE REQUIRED: YES <input checked="" type="checkbox"/> NO _____
MAX. COVERAGE OF LOT BY STRUCTURES <u>N/A</u>	SPECIAL CONDITIONS: <u>MUST submit situation</u> <u>CERTIFICATE BEFORE C.O. sign off. CALL for</u> <u>L.S. Planning inspection prior to C.O.</u>

Modifications to this Planning Clearance must be approved, in writing, by the Public Works & Planning Department Director. The structure authorized by this application cannot be occupied until a final inspection has been completed and a Certificate of Occupancy has been issued by the Building Department (Section 307, Uniform Building Code). Required improvements in the public right-of-way must be guaranteed prior to issuance of a Planning Clearance. All other required site improvements must be completed or guaranteed prior to issuance of a Certificate of Occupancy. Any landscaping required by this permit shall be maintained in an acceptable and healthy condition. The replacement of any vegetation materials that die or are in an unhealthy condition is required by the Grand Junction Zoning and Development Code.

Four (4) sets of final construction drawings must be submitted and stamped by City Engineering prior to issuing the Planning Clearance. One stamped set must be available on the job site at all times.

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's Signature [Signature] Date 9/12/09  
 Planning Approval Judith A. Rice Date 4-20-2009

Additional water and/or sewer tap fee(s) are required: YES _____ NO _____	W/O No. <u>NO Dishwasher</u> <u>NO Addl seating for rest</u>
Utility Accounting <u>[Signature]</u>	Date <u>9/9/09</u>

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.1 Grand Junction Zoning and Development Code)

(White: Planning) (Yellow: Customer) (Pink: Building Department) (Goldenrod: Utility Accounting)

**ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1 - 7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use:	
BUILDING OWNER'S NAME <u>BURNS FEC LLC</u>			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>2464 RIVERSIDE PARKWAY</u>			Company NAIC Number	
CITY <u>GRAND JUNCTION</u>	STATE <u>CO</u>	ZIP CODE <u>81505</u>		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 2 BARMAC SUBDIVISION, 2945-094-19-002</u>				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>COMMERCIAL</u>				
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-###" or ###.###") <u>39.08°/108.60°</u>		HORIZONTAL DATUM: <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): _____ <input checked="" type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>MESA COUNTY, COLORADO / 050115</u>		B2. COUNTY NAME <u>MESA</u>		B3. STATE <u>CO</u>	
B4. MAP AND PANEL NUMBER <u>0460</u>	B5. SUFFIX <u>B</u>	B6. FIRM INDEX DATE <u>JULY 15, 1992</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>JULY 15, 1992</u>	B8. FLOOD ZONE(S) <u>X, AE</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>4542.50</u>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe): \_\_\_\_\_

B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988  Other (Describe): \_\_\_\_\_

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?  Yes  No Designation Date \_\_\_\_\_

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction  
 \*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

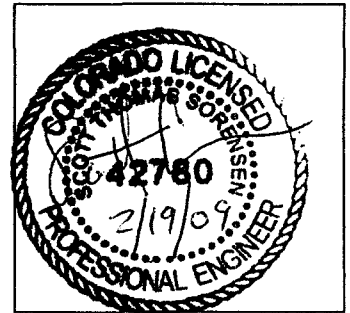
C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO  
 Complete items C3.-a) below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum 88 Conversion/Comments NGVD 29 TO NAVD 88 ⇒ 0.99m = 3.25 FT ⇒ 4542.50 + 3.25 FT = 4545.75 FT

Elevation reference mark used \_\_\_\_\_ Does the elevation reference mark used appear on the FIRM?  Yes  No

- o a) Top of bottom floor (including basement or enclosure) 4548.00 ft.(m)
- o b) Top of next higher floor \_\_\_\_\_ ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) \_\_\_\_\_ ft.(m)
- o d) Attached garage (top of slab) \_\_\_\_\_ ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) \_\_\_\_\_ ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) \_\_\_\_\_ ft.(m)
- o g) Highest adjacent (finished) grade (HAG) \_\_\_\_\_ ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade \_\_\_\_\_
- o i) Total area of all permanent openings (flood vents) in C3.h \_\_\_\_\_ sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date



**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME SCOTT SORENSEN LICENSE NUMBER 42780

TITLE CIVIL ENGINEER COMPANY NAME AUSTIN CIVIL GROUP, INC

ADDRESS 336 MAIN ST. SUITE 203 CITY GRAND JUNCTION STATE CO ZIP CODE 81501

SIGNATURE [Signature] DATE 2/19/09 TELEPHONE 242-7540

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2469 RIVERSIDE PARKWAY			Policy Number
CITY GRAND JUNCTION	STATE CO	ZIP CODE 81505	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number \_\_\_ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is \_\_\_ ft.(m) \_\_\_ in.(cm)  above or  below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is \_\_\_ ft.(m) \_\_\_ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is \_\_\_ ft.(m) \_\_\_ in.(cm)  above or  below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?  
 Yes  No  Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME SID SQUIRRELL

ADDRESS 344 7TH STREET CITY GRAND JUNCTION STATE CO ZIP CODE 81501

SIGNATURE [Signature] DATE 2/18/09 TELEPHONE 970-241-2909

COMMENTS

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1.  The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.  A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3.  The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for:  New Construction  Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

G9. BFE or (in Zone AO) depth of flooding at the building site is: \_\_\_\_\_ ft.(m) Datum: \_\_\_\_\_

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

Check here if attachments

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use:
BUILDING OWNER'S NAME <i>BURNS FEC LLC</i>		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <i>2469 RIVERSIDE PARKWAY</i>		Company NAIC Number	
CITY <i>GRAND JUNCTION</i>	STATE <i>CO</i>	ZIP CODE <i>81505</i>	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <i>LOT 2 BARMAC SUBDIVISION 2945-094-19-002</i>			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <i>COMMERCIAL</i>			
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ##.####") <i>39.08°/108.60°</i>		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input checked="" type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 <input checked="" type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <i>MESA COUNTY, COLORADO 1080115</i>		B2. COUNTY NAME <i>MESA</i>		B3. STATE <i>CO</i>	
B4. MAP AND PANEL NUMBER <i>0460</i>	B5. SUFFIX <i>B</i>	B6. FIRM INDEX DATE <i>JULY 15, 1992</i>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <i>JULY 15, 1992</i>	B8. FLOOD ZONE(S) <i>X, AE</i>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <i>4542.50</i>

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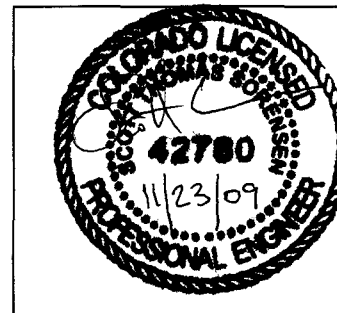
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Datum 88 Conversion/Comments NGVD29 to NAVD88 ⇒ 0.99 m = 3.25 ft ⇒ 4542.50 + 3.25 ft = 4545.75 ft

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 I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME SCOTT SORENSON LICENSE NUMBER 42780

TITLE CIVIL ENGINEER COMPANY NAME AUSTIN CIVIL GROUP, INC.

ADDRESS 336 MAIN ST. SUITE 203 CITY GRAND JUNCTION STATE CO ZIP CODE 81501

SIGNATURE [Signature] DATE 11/23/09 TELEPHONE 242-7540

<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>			For Insurance Company Use:
BUILDING-STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 2469 RIVERSIDE PARKWAY			Policy Number
CITY BRAND JUNCTION	STATE CO	ZIP CODE 81505	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

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PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

SID SQUIRRELL

ADDRESS

241 7th STREET

CITY

BRAND JUNCTION

STATE

CO

ZIP CODE

81501

SIGNATURE

*Sidney Squirell*

DATE

11/24/09

TELEPHONE

970-241-

COMMENTS

Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

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Datum: \_\_\_\_

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

Check here if attachments