

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

Planning \$ <u>5</u>
Bldg Permit #
File #

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

Building Address 2779 Crossroads Blvd.
 Parcel No. 2701-361-22-014
 Subdivision _____
 Filing _____ Block _____ Lot _____

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 Rocky Mountain Health Plans
 Address 2775 Crossroads Blvd
 City / State / Zip Grand Junction, CO 81506

DESCRIPTION OF WORK & INTENDED USE:
 Remodel
 Addition
 Other: _____
 Change of Use (*Specify uses below)
 Change of Business Bank to Office

APPLICANT INFORMATION:

Name Blythe Group + co
 Address 618 Road
 City / State / Zip Grand Junction, CO 81501
 Telephone (970) 242-1058

INTENTION ONLY
 * FOR CHANGE OF USE:
 *Existing Use: BANK
 *Proposed Use: Office
plumbing, electrical, mechanical
 Estimated Remodeling Cost \$ 200,000.00
 Current Fair Market Value of Structure \$ 1,53,780.00

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 _____ (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 BRAD WEST Date 5/12/10
 Planning Approval Judith Reynolds Date 5/12/10

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No.
Utility Accounting <u>T. Bensey</u>	Date <u>5/12/10</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)