

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

Planning \$ <u>10⁰⁰</u>
Bldg Permit #
File #

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

Building Address 2454 HIGHWAY 6-50 #108
 Parcel No. #108
 Subdivision _____
 Filing _____ Block _____ Lot _____

Multifamily Only: _____
 No. of Existing Units _____ No. Proposed _____
 Sq. Ft. of Existing 1960 Sq. Ft. Proposed 1960
 Sq. Ft. of Lot / Parcel 1960
 Sq. Ft. Coverage of Lot by Structures & Impervious Surface
 (Total Existing & Proposed) _____

OWNER INFORMATION:

Name TRAVIS LICKMAN
 Address 2561 FENTON
 City / State / Zip CO CO 80505

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

APPLICANT INFORMATION:

Name SAME
 Address _____
 City / State / Zip _____
 Telephone _____

* FOR CHANGE OF USE:
 *Existing Use: CLOSET STORE RETAIL
 *Proposed Use: SALON/TATTOO

PAID
MAR 03 2010
TB

Estimated Remodeling Cost \$ 4,000
 Current Fair Market Value of Structure \$ 1,762,200

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>C1</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: _____	
(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 TRAVIS LICKMAN Date 3-3-10
 Planning Approval Wendy Spurr Date 3/3/10

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No.
Utility Accounting <u>C. Bensley</u>	Date <u>3/3/10</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)