

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

Planning \$	10 ⁰⁰
Bldg Permit #	
File #	

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

Public Works & Planning Department

19089-0

Building Address 2535 Patterson Rd
 Parcel No. 2943-072-25-977
 Subdivision Heritage Homes - The Falls
 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 CARE SUPPORT LLC
 Address 2835 Patterson Rd
 City / State / Zip Grand Junction, CO 81506

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 checked="" type="checkbox"/> Other: <u>INSTALL 15x8 prefab shed</u> | |

APPLICANT INFORMATION:

Name RUDY NELSON
 Address 11241 HOLLY ST.
 City / State / Zip Timnonthon, CO 80233
 Telephone 720-235-7512

*** FOR CHANGE OF USE:**

*Existing Use: _____
 *Proposed Use: _____
 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 <u>PD</u>	Maximum coverage of lot by structures _____
SETBACKS: Front <u>Per plot</u> 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: <u>Disseminate 15' North</u> <u>10' West</u> <u>15-25 South</u>
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 [Signature] Date 3-2-10
 Planning Approval Pat Olenko Date 3/2/10

Additional water and/or sewer tap fee(s) are required:	YES	NO <input checked="" type="checkbox"/>	W/O No. no water/sewer
Utility Accounting <u>[Signature]</u>	Date <u>3/2/10</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)