

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

Existing Acct.
555-1

Planning \$	5.00
Bldg Permit #	
File #	

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)
Public Works & Planning Department

Building Address 321 PITKIN AVE.
 Parcel No. 2945-143-38-003
 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 DAMIAN LOY
 Address 314 LICAL LN.
 City / State / Zip 65, MO. 81505

DESCRIPTION OF WORK & INTENDED USE:

- Remodel
- Addition
- Other: _____
- Change of Use (*Specify uses below)
- Change of Business

APPLICANT INFORMATION:

Name SAME
 Address _____ TB
 City / State / Zip _____
 Telephone 216-7387 248-9196

* FOR CHANGE OF USE:

*Existing Use: WAREHOUSE / COMMERCIAL
 *Proposed Use: OFFICE - TENANT FINISH
 Estimated Remodeling Cost \$ 4,000.00
 Current Fair Market Value of Structure \$ ~~40,800~~ 36,800.00

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 <u>15</u> from property line (PL)	Landscaping/Screening Required: YES _____ NO _____
Side <u>0</u> from PL Rear <u>10</u> from PL	Parking Requirement _____
Maximum Height of Structure(s) _____	Floodplain Certificate Required: YES _____ NO _____
Voting District _____	Special Conditions: _____
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 DAMIAN LOY Date 2-3-10
 Planning Approval Pat Bunsley Date 2/3/10

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

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

Existing Acct.
555-1

PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)
Public Works & Planning Department

Planning \$ <u>500</u>
Bldg Permit #
File #

Amended 3/25/10 PD

Building Address 321 PITKIN AVE.
 Parcel No. 2945-143-38-003
 Subdivision _____
 Filing _____ Block 146 Lot (W25)

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 DAMIAN LOY
 Address 314 LICAL LN.
 City / State / Zip 65, MO. 81505

DESCRIPTION OF WORK & INTENDED USE:
 Remodel Change of Use (*Specify uses below)
 Addition Change of Business
 Other: Build stairs to access second floor breakroom - created during remodel

APPLICANT INFORMATION:

Name SAME
 Address _____ **TB**
 City / State / Zip _____
 Telephone 216-7387 248-9196

* FOR CHANGE OF USE:
 *Existing Use: WAREHOUSE / COMMERCIAL
 *Proposed Use: OFFICE - TENANT FINISH
 Estimated Remodeling Cost \$ 4,800.00 + 800
 Current Fair Market Value of Structure \$ 40,800 - 36,880.00

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 <u>15</u> from property line (PL)	Landscaping/Screening Required: YES _____ NO _____
Side <u>0</u> from PL Rear <u>10</u> from PL	Parking Requirement _____
Maximum Height of Structure(s) _____	Floodplain Certificate Required: YES _____ NO _____
Voting District _____	Special Conditions: _____
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 DAMIAN LOY Date 2-3-10
 Planning Approval Pat Bensley Date 2/3/10

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