

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

Planning \$	5.00
Bldg Permit #	
File #	

## PLANNING CLEARANCE

(Multifamily & Nonresidential Remodels and Change of Use)

### Public Works & Planning Department

Building Address AR# 743 Road Ave  
747 Road Ave  
 Parcel No. 2945-144-17-015  
 Subdivision Original Townsite  
 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 NCCMU  
 Address 747 Road Ave  
 City / State / Zip Grand Jct

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

**APPLICANT INFORMATION:**

Name BETTON CONST  
 Address 3267 C Road  
 City / State / Zip Palisad CO 81526  
 Telephone 970-210-1017

\* FOR CHANGE OF USE:  
 \*Existing Use: \_\_\_\_\_  
 \*Proposed Use: \_\_\_\_\_

Estimated Remodeling Cost \$ 800.00  
 Current Fair Market Value of Structure \$ 655,910.00

**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>B-2</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 [Signature] Date 5/3/2010  
 Planning Approval [Signature] Date 5/3/10

Additional water and/or sewer tap fee(s) are required: YES _____ NO <input checked="" type="checkbox"/> W/O No. _____
Utility Accounting <u>[Signature]</u> Date <u>5/3/10</u>

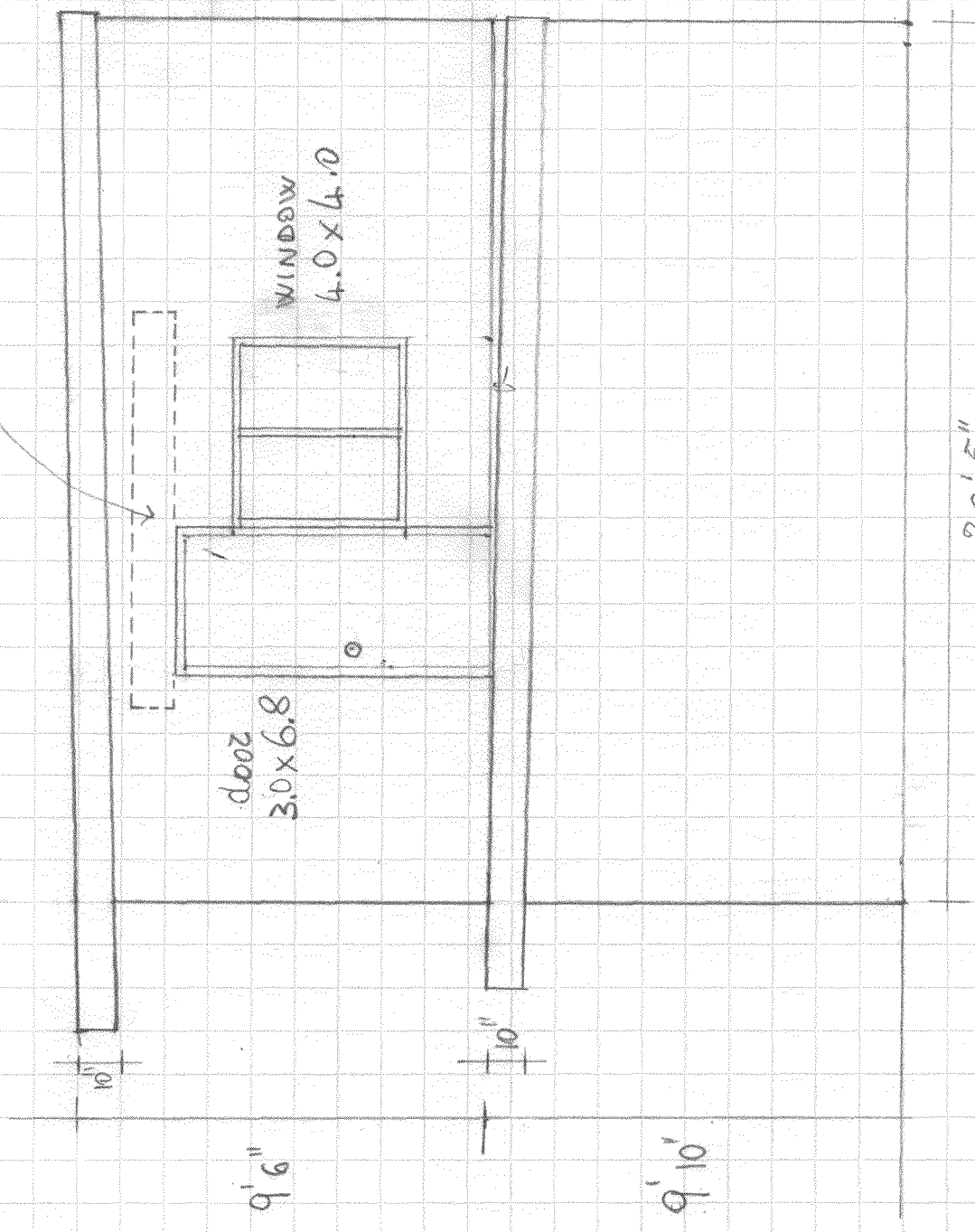
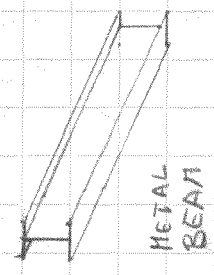
VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 2.2.C.4 Grand Junction Zoning & Development Code)  
 (White: Planning)      (Yellow: Customer)      (Pink: Building Department)      (Goldenrod: Utility Accounting)

747 Reed Ave

METAL BEAM

JOB DESCRIPTION:

- HEADER ABOVE  
DOOR & WINDOW  
USING METAL  
BEAM 8"X12"



ACCEPTED *Pat Dunlop 5/2/10*  
ANY CHANGE OF SETBACKS MUST BE  
APPROVED BY THE CITY PLANNING DIVISION.  
IT IS THE APPLICANT'S RESPONSIBILITY TO  
PROPERLY LOCATE AND IDENTIFY  
EASEMENTS AND UTILITIES.