

APPLICATION FOR THE PLANNING CLEARANCE FOR A BUILDING PERMIT

SUBMITTALS REQUIRED: (2) Plot Plans showing Parking, Landscaping, Setbacks to all property lines, and all streets which abut the parcel:

BLDG ADDRESS: 2530 N 8th

SQ FT OF BLDG: 32,000

SUBDIVISION: Capital Hill

SQ FT OF LOT: _____

FILING # 1 BLK # 1 LOT # 1 & 2

NUMBER OF FAMILY UNITS: _____

TAX SCHEDULE NUMBER:

NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION

2945/11-14-001 002

None

PROPERTY OWNER: PH Management

USE OF ALL EXISTING BUILDINGS:

ADDRESS: 2754 Compass Dr

~~As per building Dept.~~

PHONE: 245-0310

DESCRIPTION OF WORK AND INTENDED USE:

New Medical Bldg.

FOR OFFICE USE ONLY

ZONE: B-1

FLOOD PLAIN: YES NO

SETBACKS: F 0 S 0 R 0

GEOLOGIC HAZARD: YES NO

RIGHT OF WAY: _____

CENSUS TRACT NUMBER: 5

MAXIMUM HEIGHT: As per approved

SPECIAL CONDITIONS: Need

PARKING SPACES REQUIRED: plan

detailed landscape plan -
This permit for foundation
only. landscape plan before
remainder of permit.

LANDSCAPING/SCREENING: _____

ANY MODIFICATION TO THIS APPROVED PLANNING CLEARANCE MUST BE APPROVED IN WRITING BY THIS DEPARTMENT.

THE STRUCTURE APPROVED BY THIS APPLICATION CANNOT BE OCCUPIED UNTIL A CERTIFICATE OF OCCUPANCY (CO) IS ISSUED BY THE BUILDING DEPARTMENT (Section 307, Uniform Building Code).

ANY LANDSCAPING REQUIRED BY THIS PERMIT SHALL BE MAINTAINED IN AN ACCEPTABLE AND HEALTHY CONDITION. THE REPLACEMENT OF ANY VEGETATION MATERIALS THAT DIE OR ARE IN AN UNHEALTHY CONDITION SHALL BE REQUIRED.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THE ABOVE IS CORRECT AND I AGREE TO COMPLY WITH THE REQUIREMENTS ABOVE. FAILURE TO COMPLY SHALL RESULT IN LEGAL ACTION.

Jim Wilson
SIGNATURE

DATE APPROVED: 11/25/83

APPROVED BY: [Signature]