DATE SUBMITTED: <u>4-30-87</u>	PERMIT # 27573
	FEE #5 **
PLANNING CLEARANCE GRAND JUNCTION PLANNING DEPARTMENT	
BLDG ADDRESS: 2029 BARBERRY AV	SQ. FT. OF BLDG: <u>198+</u>
SUBDIVISION: SPRING VALLEY	SQ. FT. OF LOT:
FILING $\#$ 2 BLK $\#$ 1 LOT $\#$ 14	NUMBER OF FAMILY UNITS:
TAX SCHEDULE NUMBER:	NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:
2945-014-12-014	J
PROPERTY OWNER: ROBERT CASTELLA	USE OF ALL EXISTING BUILDINGS:
ADDRESS: 2029 BARBERRY AU	RESIDERICE
PHONE:	SUBMITTALS REQ'D: TWO (2) PLOT
DESCRIPTION OF WORK AND INTENDED USE:	PLANS SHOWING PARKING, LAND- SCAPING, SETBACKS TO ALL PROPERTY
FUSTALL GREENHOUSE SOLARIUM	LINES, AND ALL STREETS WHICH ABUT THE PARCEL.

FOR OFFICE USE ONLY	
ZONE: <u>RSF-5</u>	FLOODPLAIN: YES NO $\underline{\chi}$
SETBACKS: F_{20}' S S R 25	GEOLOGIC HAZARD: YES NO X
MAXIMUM HEIGHT:	CENSUS TRACT #: 10
PARKING SPACES REQ'D:	TRAFFIC ZONE:
LANDSCAPING/SCREENING:	SPECIAL CONDITIONS:
ANY MODIFICATION TO THIS APPROVED PLANNING CLEARANCE MUST BE APPROVED, IN WRITING, BY THS DEPARTMENT. THE STRUCTURE APPROVED BY THIS APPLICATION CANNOT BE OCCUPIED UNTIL A CERTIFICATE OF OCCUPANCY (C.O.) IS ISSUED BY THE BUILDING DEPARTMENT (SECTION 307, UNIFORM BUILDING CODE.) ANY LANDSCAPING REQUIRED BY THIS PERMIT SHALL BE MAINTAINED IN AN ACCEPTABLE	
AN 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 THE CORRECT AND I AGREE TO COMPLY WITH THE RE COMPLY SHALL RESULT IN LEGAL ACTION.	
DATE APPROVED: $4-30-87$	Robert Constille
DATE APPROVED: 4-30-87 APPROVED BY: Junio	SIGNATURE

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