

DATE SUBMITTED: 1-7-88

PERMIT # 29530

FEE no fee

PLANNING CLEARANCE

GRAND JUNCTION PLANNING DEPARTMENT

BLDG ADDRESS: 925 4TH AVE. FOURTH AVE SQ. FT. OF BLDG: 3,000

SUBDIVISION: CANONS SQ. FT. OF LOT: _____

FILING # _____ BLK # _____ LOT # _____ NUMBER OF FAMILY UNITS: _____

TAX SCHEDULE NUMBER: 2945-231-13-932 NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION: _____

PROPERTY OWNER: MESA COUNTY USE OF ALL EXISTING BUILDINGS: _____

ADDRESS: 925 4TH AVE. _____

PHONE: 244-1817 _____

DESCRIPTION OF WORK AND INTENDED USE: CONST. OF 2 BATHROOMS IN EXIST. BLDG.
interior remodel SUBMITTALS REQ'D: TWO (2) PLOT PLANS SHOWING PARKING, LANDSCAPING, SETBACKS TO ALL PROPERTY LINES, AND ALL STREETS WHICH ABUT THE PARCEL.

FOR OFFICE USE ONLY

ZONE: _____ FLOODPLAIN: YES _____ NO _____

SETBACKS: F _____ S _____ R _____ GEOLOGIC HAZARD: YES _____ NO _____

MAXIMUM HEIGHT: _____ CENSUS TRACT #: _____

PARKING SPACES REQ'D: _____ TRAFFIC ZONE: _____

LANDSCAPING/SCREENING: _____ SPECIAL CONDITIONS: _____

ANY MODIFICATION TO THIS APPROVED PLANNING CLEARANCE MUST BE APPROVED, IN WRITING, BY THE 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 THIS APPLICATION AND THE ABOVE IS CORRECT AND I AGREE TO COMPLY WITH THE REQUIREMENTS ABOVE. FAILURE TO COMPLY SHALL RESULT IN LEGAL ACTION.

DATE APPROVED: 1-7-88

APPROVED BY: Linda



SIGNATURE