

DATE SUBMITTED: 5/8/89

PERMIT 32919
FEE ~~75.00~~

PLANNING CLEARANCE

GRAND JUNCTION PLANNING DEPARTMENT

BLDG ADDRESS: 1165 Bookcliff

SQ. FT. OF BLDG: _____

SUBDIVISION: Anderson

SQ. FT. OF LOT: 20,000

FILING # _____ BLK # _____ LOT # 1

NUMBER OF FAMILY UNITS: _____

TAX SCHEDULE NUMBER:
2945-111 00 080

NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:
1

PROPERTY OWNER: Don Anderson

USE OF ALL EXISTING BUILDINGS:

ADDRESS: 393 1/2 Hillview Dr

proposed under vet clinic

PHONE: 241-6777

DESCRIPTION OF WORK AND INTENDED USE:
Interior

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

NAME: PB

FLOODPLAIN: YES _____ NO X

SETBACKS: F _____ S _____ R _____

GEOLOGIC HAZARD: YES _____ NO _____

MAXIMUM HEIGHT: _____

PARKING SPACES REQ'D: _____

CENSUS TRACT #: 5

LANDSCAPING/SCREENING: _____

TRAFFIC ZONE: 27

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: 5/8/89

APPROVED BY: Kathy [Signature]

[Signature]
SIGNATURE