	And the second of the second o
DATE SUBMITTED: $\frac{\delta 3 /\delta 9}{}$	PERMIT # <u>33897</u>
	FEE 5 [∞]
PLANNING CLEARANCE GRAND JUNCTION PLANNING DEPARTMENT	
BLDG ADDRESS: 1745 Crest VIEW Dr.	SQ. FT. OF BLDG: 2600
SUBDIVISION: CFEST VIEW	SQ. FT. OF LOT: 10500
FILING # / BLK # LOT # 23	NUMBER OF FAMILY UNITS:
TAX SCHEDULE NUMBER:	NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:
2945-013-09-001	No Ne
PROPERTY OWNER: Esther Faussone	USE OF ALL EXISTING BUILDINGS:
ADDRESS: 1745 CHEST VIEW DA	Col of All Datoliko Bollbings.
PHONE: 243-1545	CUDATES A DECIDE THE ACT OF THE
DESCRIPTION OF WORK AND INTENDED USE:	SUBMITTALS REQ'D: TWO (2) PLOT PLANS SHOWING PARKING, LAND- SCAPING, SETBACKS TO ALL PROPERTY
New House	LINES, AND ALL STREETS WHICH ABUT THE PARCEL.
TOR OFFICE USE ONLY SINE: Prophism of the pro	
SETBACKS: F 15' S 6' R 10'	GEOLOGIC HAZARD: YES NO
MAXIMUM HEIGHT:	
PARKING SPACES REQ'D:	CENSUS TRACT #: # 10
LANDSCAPING/SCREENING:	SPECIAL CONDITIONS: 12 feet min
	between structure
	Demour micrus
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 THIS APPLICATION AND THE ABOVE IS CORRECT AND I AGREE TO COMPLY WITH THE REQUIREMENTS ABOVE. FAILURE TO MPLY SHALL RESULT IN LEGAL ACTION.	
DATE APPROVED: $8/31/89$	* Cither Janeserne
APPROVED BY: Sinde Witzel	SIGNATURE

