

DATE SUBMITTED: 5/9/89

PERMIT # 32437

FEE 247

PLANNING CLEARANCE

GRAND JUNCTION PLANNING DEPARTMENT

BLDG ADDRESS: 1060 ORCHARD AVE

SQ. FT. OF BLDG: Existing

SUBDIVISION: _____

SQ. FT. OF LOT: _____

FILING # _____ BLK # _____ LOT # _____

NUMBER OF FAMILY UNITS: _____

TAX SCHEDULE NUMBER:
2945-111-12-001

NUMBER OF BUILDINGS ON PARCEL
BEFORE THIS PLANNED CONSTRUCTION:

PROPERTY OWNER: Community Hosp.

USE OF ALL EXISTING BUILDINGS:

ADDRESS: 2021 North 12th

PHONE: 242-0920

DESCRIPTION OF WORK AND INTENDED USE:
Interior Remodel

SUBMITTALS REQ'D: TWO (2) PLOT
PLANS SHOWING PARKING, LAND-
SCAPING, 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: * 1 space for
each 300 square feet of floor
area

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: 5/9/89

APPROVED BY: And. Wetzel

W.C. Heaves
SIGNATURE