DATE SUBMITTED: 9/2//89	PERMIT # <u>34008</u>
	FEE Model
PLANNING CL	
GRAND JUNCTION PLANN	
BLDG ADDRESS: 1530 (1) almut	SQ. FT. OF BLDG: <u>5307</u>
SUBDIVISION: Jan mont	SQ. FT. OF LOT: <u>37,500</u>
FILING # BLK # LOT #	NUMBER OF FAMILY UNITS:
TAX SCHEDULE NUMBER:	NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:
2945-122-00-059	/
PROPERTY OWNER: Acritage Elder Care	USE OF ALL EXISTING BUILDINGS:
ADDRESS: 301 4411	haust
PHONE: <u>243-7224</u>	SUBMITTALS REQ'D: TWO (2) PLOT
DESCRIPTION OF WORK AND INTENDED USE:	PLANS SHOWING PARKING, LAND- SCAPING, SETBACKS TO ALL PROPERTY
New Const - Finond Cone	LINES, AND ALL STREETS WHICH ABUT THE PARCEL.
FOR OFFICE USE ONLY	
NE: <u><u>RMF</u> 16</u>	FLOODPLAIN: YES NO
SETBACKS: F <u>45</u> S <u>10</u> R <u>20</u>	GEOLOGIC
MAXIMUM HEIGHT: 36	HAZARD: YES NO
PARKING SPACES REQ'D:	CENSUS TRACT #:
LANDSCAPING/SCREENING:	TRAFFIC ZONE: 28
U.I. Con	SPECIAL CONDITIONS: Special USP
Must pay lacks and Open Space Les pury the	all met
ANY MODIFICATION TO THIS APPROVED PLANNING	G CLEARANCE MUST BE APPROVED, IN
WRITING, BY THS DEPARTMENT. THE STRUCTURI CANNOT BE OCCUPIED UNTIL A CERTIFICATE OF	
BUILDING DEPARTMENT (SECTION 307, UNIFORM	BUILDING CODE.)
ANY LANDSCAPING REQUIRED BY THIS PERMIT SE AN HEALTHY CONDITION. THE REPLACEMENT OF	
OR ARE IN AN UNHEALTHY CONDITION SHALL BE	REQUIRED.
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS CORRECT AND I AGREE TO COMPLY WITH THE RE	
MPLY SHALL RESULT IN LEGAL ACTION.	
DATE APPROVED: <u>7/2/87</u>	Harley Jorkim
APPROVED BY: Kithy Pritmin	SIGNATURE
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TAX SCHEDULE NUMBER:
2945-122-00-059
PROPERTY OWNER: Heitage Alder (