DATE SUBMITTED:	PERMIT # 34/16
	FEE Ma dee
PLANNING CLEARANCE	
1305 GRAND JUNCTION PLANN	ING DEPARTMENT
BLDG ADDRESS: <u>HO Wellington H</u> /10	SQ. FT. OF BLDG:
SUBDIVISION: fullington Town Romes	SQ. FT. OF LOT: $33/2$
FILING # BLK # LOT $\# \frac{12413}{2}$	NUMBER OF FAMILY UNITS:/
TAX SCHEDULE NUMBER:	NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:
2945-122-17-012,013	Sr +
PROPERTY OWNER: Robert L. Daues	USE OF ALL EXISTING BUILDINGS:
ADDRESS: 135 Carol Ct.	SE OF ALL EXISTING BOILDINGS:
PHONE: <u>434-7520</u>	SUBMITTALS REQ'D: TWO (2) PLOT
DESCRIPTION OF WORK AND INTENDED USE:	PLANS SHOWING PARKING, LAND-
town homes	SCAPING, SETBACKS TO ALL PROPERTY LINES, AND ALL STREETS WHICH ABUT THE PARCEL.

DD II C	FLOODPLAIN: YES <u>NO χ</u>
SETBACKS: F S R \	GEOLOGIC
MAXIMUM HEIGHT:	HAZARD: YES NO
PARKING SPACES REQ'D:	CENSUS TRACT #:
LANDSCAPING/SCREENING:	TRAFFIC ZONE: 28
	SPECIAL CONDITIONS: all landscaping
	must be completed prin to concerd
*****	-
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 CORRECT AND I AGREE TO COMPLY WITH THE REQ COMPLY SHALL RESULT IN LEGAL ACTION.	
DATE APPROVED: 9/25/89	
APPROVED BY: Kathy Portm	SIGNAPURE
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