DATE SUBMITTED: <u>9/19/90</u>	PERMIT # 3696/
	FEE 7500
PLANNING CLEARANCE GRAND JUNCTION PLANNING DEPARTMENT	
BLDG ADDRESS:	SQ. FT. OF BLDG:
SUBDIVISION: CHY of J- g-Mobiley Sub	SQ. FT. OF LOT:
FILING # BLK # LOT $\#_{2,3,4}^{2,4}$	NUMBER OF FAMILY UNITS:
TAX SCHEDULE NUMBER:	NUMBER OF BUILDINGS ON PARCEL
2945-154-07-001	BEFORE THIS PLANNED CONSTRUCTION:
PROPERTY OWNER: City Manhat Inc	
ADDRESS: P.O. 30x 729	USE OF ALL EXISTING BUILDINGS:
PHONE: 244-1053	
DESCRIPTION OF WORK AND INTENDED USE:	SUBMITTALS REQ'D: TWO (2) PLOT PLANS SHOWING PARKING, LAND-
Intrain Remodel & OUT Sille Repair	SCAPING, SETBACKS TO ALL PROPERTY LINES, AND ALL STREETS WHICH ABUT THE PARCEL.

FOR OFFICE US	S ONLY
ZONE: <u>C-2</u>	FLOODPLAIN: YES NO
SETBACKS: FS	GEOLOGIC HAZARD: YES NO
MAXIMUM HEIGHT:	$\overline{\mathbf{O}}$
PARKING SPACES REQ'D: Misting	CENSUS TRACT #: 43 TRAFFIC ZONE: 43
LANDSCAPING/SCREENING: MLSting	
0	A MILLO
	- ma
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 ORRECT AND I AGREE TO COMPLY WITH THE REQUIREMENTS ABOVE. FAILURE TO	

ORRECT AND I AGREE TO COMPLY WITH

DATE APPROVED: <u>9/19/90</u> APPROVED BY: Kathy Portun

Mark Alex SIGNATURE