DATE SUBMITTED: 10/17/61

| PERMIT | NO. | 40229 |  |
|--------|-----|-------|--|
| EEE ¢  |     | 7000  |  |

PLANNING CLEARANCE
GRAND JUNCTION COMMUNITY DEVELOPMENT DEPARTMENT

| •  |   |  |  |
|--|---|--|--|
| BLDG ADDRESS: 5675, 15454  | SQ. FT. OF BLDG:  |  |  |
| SUBDIVISION:   | SQ. FT. OF LOT:   |  |  |
| FILING NO BLK NO LOT NO  | NO. OF FAMILY UNITS: MARKET AND                       |  |  |
| TAX SCHEDULE NO: 2915-242-12-002   | NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:                           |  |  |
| OWNER: <u>Interstate Brands</u>  | USE OF EXISTING BUILDINGS:  MAKLING BREAK - BAKERY  |  |  |
| ADDRESS: <u>P.O., Box 4/9627</u>   |   |  |  |
| TELEPHONE: 641-6627  | DESCRIPTION OF WORK AND INTENDED USE:  Listall 2-600 gallow showe ground tooks for furth. |  |  |
| SUBMITTALS REQUIRED: Two plot plans showing parking, landscaping, setbacks to all property lines, and all streets which abut the parcel.   |   |  |  |
| ***************************************  | **********************  |  |  |
| FOR (  | OFFICE USE ONLY   |  |  |
| ONE  | FLOODPLAIN: YES NO  |  |  |
| SETBACKS: FRONT  | GEOLOGIC HAZARD: YES NO   |  |  |
| SIDE Ø REAR Ø  | CENSUS TRACT: 8 TRAFFIC ZONE: 44  |  |  |
| MAXIMUM HEIGHT 65  | PARKING REQ'MT  |  |  |
| LANDSCAPING/SCREENING REQUIRED:  | SPECIAL CONDITIONS:  Fire Dept. signoff regulared   |  |  |
| Modifications to this Planning Clearance must be approved, in writing, by this Department. The structure approved by this application cannot be occupied until a Certificate of Occupancy is issued by the Building Department (Section 307, Uniform Building Code). |   |  |  |
| Any landscaping required by this permit shall be maintained in an acceptable and 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.  |   |  |  |
| In Monton  | 1 Kod W. Barr Forman  |  |  |
| Pepartment Approval  | Applicant Signature   |  |  |
| Date Approved  | Date  |  |  |

