

DATE SUBMITTED: _____

PERMIT # 38520

FEE \$5.00

PLANNING CLEARANCE

GRAND JUNCTION PLANNING DEPARTMENT

LOG ADDRESS: 585 25 1/2 Rd #196

SQ. FT. OF BLDG: _____

SUBDIVISION: Paradise Valley MHP

SQ. FT. OF LOT: _____

FILING # _____ BLK # _____ LOT # _____

NUMBER OF FAMILY UNITS: _____

TAX SCHEDULE NUMBER:

NUMBER OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION: _____

294510 000 100 7008-053-44-923

PROPERTY OWNER: FRANCINE N. FLANAGAN

ADDRESS: 585.25 1/2 Rd, #196
81505

USE OF ALL EXISTING BUILDINGS: _____

PHONE: 248-7411

DESCRIPTION OF WORK AND INTENDED USE: _____

SUBMITTALS REQ'D: TWO (2) PLOT PLANS SHOWING PARKING, LANDSCAPING, SETBACKS TO ALL PROPERTY LINES, AND ALL STREETS WHICH ABUT THE PARCEL.

FOR OFFICE USE ONLY

E: PMH

FLOODPLAIN: YES _____ NO _____

SETBACKS: F Per Park R _____

GEOLOGIC HAZARD: YES _____ NO _____

MAXIMUM HEIGHT: _____

CENSUS TRACT #: 4

PARKING SPACES REQ'D: _____

TRAFFIC ZONE: _____

LANDSCAPING/SCREENING: _____

SPECIAL CONDITIONS: _____

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: 4/30/91

APPROVED BY: Kristen K. Adbeck

Francine N. Flanagan
SIGNATURE