

DATE SUBMITTED: June 26, 1991

PERMIT # 39037

FEE 0

PLANNING CLEARANCE

GRAND JUNCTION PLANNING DEPARTMENT

BLDG ADDRESS: 600 Center Avenue Bld 1-A

SQ. FT. OF BLDG: _____

SUBDIVISION: Bookcliff Buildings

SQ. FT. OF LOT: _____

FILING # _____ BLK # _____ LOT # _____

NUMBER OF FAMILY UNITS: _____

TAX SCHEDULE NUMBER:
2945-112-00-066

NUMBER OF BUILDINGS ON PARCEL
BEFORE THIS PLANNED CONSTRUCTION:

PROPERTY OWNER: St. Mary's Hospital

USE OF ALL EXISTING BUILDINGS:

ADDRESS: P. O. Box 1628, Grand Jct. CO

offices

PHONE: 244-2273

DESCRIPTION OF WORK AND INTENDED USE:
Remodel office for dental clinic.

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

FOR OFFICE USE ONLY

ZONE: PB

FLOODPLAIN: YES _____ NO X

SETBACKS: F _____ S _____ R Remodel

GEOLOGIC HAZARD: YES _____ NO X

MAXIMUM HEIGHT: _____

PARKING SPACES REQ'D: _____

CENSUS TRACT #: 4

LANDSCAPING/SCREENING: Interior Remodel only

TRAFFIC ZONE: 26

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 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.

DATE APPROVED: 6/26/91

APPROVED BY: B. Paulson

Robert H. [Signature]
SIGNATURE