DATE SUBMITTED: $5 - (9 - 95)$	8/2 <sup>7/92</sup> PERMIT NO. <u>42653 /</u> FEE \$
<b>PLANNING CLEARANCE</b> GRAND JUNCTION COMMUNITY DEVELOPMENT DEPARTMENT	
BLDG ADDRESS _ 2721 N. 12 4	$\frac{1}{2} \qquad \text{SQ. FT. OF BLDG: } 30,000 \qquad $
SUBDIVISION	SQ. FT. OF LOT: 2+ ACRES
FILING # BLK # LOT #	NO. OF FAMILY UNITS:
TAX SCHEDULE # $2945 - 624 - 60 = 63$	NO. OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION:
OWNER HILLTOP HEALTH SERVICE	S USE OF EXISTING BUILDINGS: . TROFFESIONAL OFFICES
ADDRESS 1100 PATTERSON RD	/ •
TELEPHONE: 292-8980	DESCRIPTION OF WORK AND INTENDED USE: <u>RECONFIGURATION OF INTERIOR</u> SPACE - OFFICES
REQUIRED: Two plot plans showing parking, landscaping, setbacks to all property lines, and all streets which abut the parcel.	
***************************************	
FOR OFFICE USE ONLY	
ZONE <u>RSF-4</u>	FLOODFLAIN: YES NO
STBACKS: FRONT 2	FLOODFLAIN: YES NO GEOLOGIC HAZARD: YES NO
SIDE REAR	CENSUS TRACT: 10 TRAFFIC ZONE: 2
SIDE REAR MAXIMUM HEIGHT LANDSCAPING SERVING REQUIRED:	PARKING REQ'MT
LANDSCAPING SEREENING REQUIRED:	SPECIAL CONDITIONS:
******	***********

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.

Approval partment Date

Approved

De Applicant Signature

VALID FOR SIX MONTHS FROM DATE OF ISSUANCE (Section 9-3-2 D Grand Junction Zoning & Development Code)