

DATE SUBMITTED: 2/1/93

PERMIT NO. 44090 ✓

FEE \$ N/A ✓

PLANNING CLEARANCE

GRAND JUNCTION COMMUNITY DEVELOPMENT DEPARTMENT

BLDG ADDRESS 790 Wellington

SQ. FT. OF BLDG: _____

SUBDIVISION Wellington Medical

SQ. FT. OF LOT: _____

FILING # 1 BLK # _____ LOT # 001

NO. OF FAMILY UNITS: _____

TAX SCHEDULE # 2945-111-15-

NO. OF BUILDINGS ON PARCEL BEFORE THIS PLANNED CONSTRUCTION: _____

OWNER Ugnebo Simons Roy

USE OF EXISTING BUILDINGS: Medical offices

ADDRESS 790 Wellington Wt

DESCRIPTION OF WORK AND INTENDED USE: Interior remodel -

TELEPHONE: 243 3061

REQUIRED: Two plot plans showing parking, landscaping, setbacks to all property lines, and all streets which abut the parcel.

FOR OFFICE USE ONLY

ZONE B-1

FLOODPLAIN: YES _____ NO X

SETBACKS: FRONT _____

GEOLOGIC HAZARD: YES _____ NO X

SIDE _____ REAR INTERIOR APPLICABLE

CENSUS TRACT: 4 TRAFFIC ZONE: 26

MAXIMUM HEIGHT _____

PARKING REQ'MT _____

LANDSCAPING/SCREENING 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.

Angeline Barrett
Department Approval

[Signature]
Applicant Signature

Date Approved

2/1/93
Date

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