

## Planning and Community Development Department

2880 International Circle, Colorado Springs, CO 80910 Phone 719.520.6300 | Fax 719.520.6695 | www.elpasoco.com

## Type D Application Form (1-2C)

	Турс			"Vacant"
Please check the applic (Note: each request rec separate application for	quires completion of a	<u>P</u>	ROPERTY INFORMATION: Providence proposed development. Atta	e information to identify properties and ched additional speets if necessary.
□ A			Property Address(es):	
☐ Appeal				
☐ Approval of Location ☐ Board of Adjustment			2510 Canada Dr.	
☐ Certification of Designa	tion			
☐ Certification of Designation ☐ Const. Drawings, Minor or Major			Гах ID/Parcel Numbers(s)	Parcel size(s) in Acres:
☐ Development Agreement			/	
☐ Final Plat, Minor or Major			5332309008	3.25
☐ Final Plat, Amendment				
☐ Minor Subdivision		لإ	Existing Land Use/Development:	Zoning District:
☐ Planned Unit Dev. Amendment,			_ ' ' ' ' ' ' ' )	
Major			Commercial $\prec$	CC
□ Preliminary Plan, Major or Minor				
☐ Rezoning				
□ Road Disclaimer			Check this boy if Administ	rative Relief is being requested in
☐ SIA, Modification				<u> </u>
☐ Sketch Plan, Major or Minor				ation and attach a completed
☐ Sketch Plan, Revision			Administrative Relief reque	
☐ Solid Waste Disposal Site/Facility				ers are being requested in association
☐ Special District			with this application for dev	elopment and attach a completed
Special Use			Waiver request form.	
□ Major			·	
☑ Minor, Admin or R	enewal			
☐ Subdivision Exception			ROPERTY OWNER INFORMATION:	
Vacation		0	rganization(s) who own the pro	perty proposed for development.
☐ Plat Vacation with ROW		Α	ttach additional sheets if there	are multiple property owners.
☐ Vacation of ROW				
Variances		Ī	Name (Individual or Organization)	:
☐ Major				
☐ Minor (2 <sup>nd</sup> Dwelling or			K & S Development LLC	
Renewal)			Mailing Address:	
☐ Tower, Renewal			Mailing Address:	
☐ Vested Rights			3442 TAMPA RD SUITE B	PALM HARBOR FL, 34684
☐ Waiver of Subdivision Regulations		-		
☐ Waiver of Subdivision Regulations ☐ WSEO			Daytime Telephone:	Fax:
			(727)242-5121	
□ Other:			Email or Alternative Contact Infor	l mation:
This application form shall be accompanied by				
all required support materials.			sean@leisureconstruction.d	com
F DOD	Office Head		A	
	Office Use:	<u> </u>	rescription of the request: (	submit additional sheets if necessary):
Date:	File:			
2 11 5		_	$\sim\sim\sim\sim\sim$	
Rec'd By: Receipt #:		<b>&gt;</b>	We propose to make change	es to the approved Development Plan
		Y	* * * * * * * * * * * * * * * * * * * *	
OSD File #:				
				+
			This application is a	
		r	equest for special	
			use approval to permit	
		-	isc approval to permit	Type D Application Form 1-2C

a "mini-ware house in

the CC zoning district"

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<u>APPLICANT(s):</u> Indicate person(s) submitting the application if different than the property owner(s) (attach additional sheets if necessary)

Name (Individual or Organization): YOW Architects - Brad N	lichols
Mailing Address: 115 S. Weber St. Suite 200 Colorado S	Springs CO 80903
Daytime Telephone: (719)475-8133	Fax:
Email or Alternative Contact Information: bnichols@yowarch.com	
(attach additional sheets if necessary).	uthorized to represent the property owner and/or applicants
Name (Individual or Organization): YOW Architects - Brad N	Nichols
Mailing Address: 115 S. Weber St. Suite 200 Colorado S	Springs CO 80903
Daytime Telephone: (719)475-8133	Fax:
Email or Alternative Contact Information: bnichols@yowarch.	com
	opment Application. An owner's signature may only be executed by the companied by a completed Authority to Represent/Owner's Affidavit
complete. I am fully aware that any misrepresentation of any infor have familiarized myself with the rules, regulations and procedure that an incorrect submittal may delay review, and that any approva application and may be revoked on any breach of representation or required materials as part of this application and as appropriate to a materials to allow a complete review and reasonable determination may result in my application not being accepted or may extend the all conditions of any approvals granted by El Paso County. I unde are a right or obligation transferable by sale. I acknowledge that I a result of subdivision plat notes, deed restrictions, or restrictive consumitting to El Paso County due to subdivision plat notes, deed reany conflict. I hereby give permission to El Paso County, and apport without notice for the purposes of reviewing this development approximation proper facilities and safe access for inspection of the product of the propose of the purpose of the product of the produc	or condition(s) of approval. I verify that I am submitting all of the this project, and I acknowledge that failure to submit all of the necessary of conformance with the County's rules, regulations and ordinances length of time needed to review the project. I hereby agree to abide by restand that such conditions shall apply to the subject property only and understand the implications of use or development restrictions that are evenants. I agree that if a conflict should result from the request I am estrictions, or restrictive covenants, it will be my responsibility to resolve oblicable review agencies, to enter on the above described property with oplication and enforcing the provisions of the LDC. I agree to at all times perty by El Paso County while this application is pending.  Date:  3-20-24
Owner (s) Signature:	Date: 3-19-2024
Applicant (s) Signature:	Date: 0 13 2024