



# Planning and Community Development

2880 International Circle, Colorado Springs  
Phone 719.520.6300 | Fax 719.520.6695 | [www.pcd.org](http://www.pcd.org)

## Type C Application Form

Need either all property owners signatures or attach a completed Authority to Represent/Owners Affidavit naming the representative as the owners agent. (See page 2 Authorization for Owner's Applicant/Representative)

Please check the applicable application type (Note: each request requires completion of a separate application form):

- Administrative Relief
- Certificate of Designation, Minor
- Site Development Plan, Major
- Site Development Plan, Minor
- CMRS Co-Location Agreement
- Condominium Plat
- Crystal Park Plat
- Early Grading Request associated with a Preliminary Plan
- Maintenance Agreement
- Minor PUD Amendment
- Resubmittal of Application(s) (>3 times)
- Road or Facility Acceptance, Preliminary
- Road or Facility Acceptance, Final
- Townhome Plat

### Administrative Special Use (mark one)

- Extended Family Dwelling
- Temporary Mining or Batch Plant
- Oil and/or Gas Operations
- Rural Home Occupation
- Tower Renewal
- Other: REPLAT

### Construction Drawing Review and Permits (mark one)

- Approved Construction Drawing Amendment
- Review of Construction Drawings
- Construction Permit
- Major Final Plat
- Minor Subdivision with Improvements
- Site Development Plan, Major
- Site Development Plan, Minor
- Early Grading or Grading
- ESQCP

### Minor Vacations (mark one)

- Vacation of Interior Lot Line(s)
- Utility, Drainage, or Sidewalk Easements
- Sight Visibility
- View Corridor

Other: REPLAT

This application form shall be accompanied by all required support materials.

### PROPERTY INFORMATION: the proposed developme

Property Address(es): SEE EXHIBIT A	
Tax ID/Parcel Numbers(s) SEE EXHIBIT A	Parcel size(s) in Acres: 8.0320
Existing Land Use/Development: TRACTS AND LOTS	Zoning District: RS 20000

- Check this box if **Administrative Relief** is being requested in association with this application and attach a completed Administrative Relief request form.
- Check this box if any **Waivers** are being requested in association with this application for development and attach a completed Waiver request form.

**PROPERTY OWNER INFORMATION:** Indicate the person(s) or organization(s) who own the property proposed for development. Attached additional sheets if there are multiple property owners.

Name (Individual or Organization): SEE EXHIBIT A	
Mailing Address:	
Daytime Telephone:	Fax:
Email or Alternative Contact Information:	

### Description of the request: (attach additional sheets if necessary):

Request a replat of 9 Tracts in South Woodmoor Preserve Filing No. 1 with the adjacent lots that are also owned by the the 9 owners of the Tracts. This is the final replat (filing no. 3) that will combine 9 adjacent lots with the 9 Tracts that were platted as part of South Woodmoor Preserve Filing No. 1.

### For PCD Office Use:

Date:	File :
Rec'd By:	Receipt #:
DSD File #:	



# Planning and Community Development Department

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Phone 719.520.6300 | Fax 719.520.6695 | [www.elpasoco.com](http://www.elpasoco.com)

**APPLICANT(S):** Indicate person(s) submitting the application if different than the property owner(s) (attach additional sheets if necessary).

Name (Individual or Organization): WOSC LLC (Tish Norman, Director)	
Mailing Address: 902 Caribou Dr. W, Monument, CO 80132	
Daytime Telephone: 719-534-3495	Fax:
Email or Alternative Contact Information: tishnorman@gmail.com	

**AUTHORIZED REPRESENTATIVE(S):** Indicate the person(s) authorized to represent the property owner and/or applicants (attach additional sheets if necessary).

Name (Individual or Organization): Jane B. Fredman	
Mailing Address: 13511 Northgate Estates Dr., Ste 250, Colorado Springs, CO 80921	
Daytime Telephone: 719-434-5607	Fax:
Email or Alternative Contact Information: jane@fredmanlawco.com	

**AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVE(S):**

An owner signature is not required to process a Type A or B Development Application. An owner's signature may only be executed by the owner or an authorized representative where the application is accompanied by a completed Authority to Represent/Owner's Affidavit naming the person as the owner's agent

**OWNER/APPLICANT AUTHORIZATION:**

To the best of my knowledge, the information on this application and all additional or supplemental documentation is true, factual and complete. I am fully aware that any misrepresentation of any information on this application may be grounds for denial or revocation. I have familiarized myself with the rules, regulations and procedures with respect to preparing and filing this application. I also understand that an incorrect submittal may delay review, and that any approval of this application is based on the representations made in the application and may be revoked on any breach of representation or condition(s) of approval. I verify that I am submitting all of the required materials as part of this application and as appropriate to this project, and I acknowledge that failure to submit all of the necessary materials to allow a complete review and reasonable determination of conformance with the County's rules, regulations and ordinances may result in my application not being accepted or may extend the length of time needed to review the project. I hereby agree to abide by all conditions of any approvals granted by El Paso County. I understand that such conditions shall apply to the subject property only and are a right or obligation transferable by sale. I acknowledge that I understand the implications of use or development restrictions that are a result of subdivision plat notes, deed restrictions, or restrictive covenants. I agree that if a conflict should result from the request I am submitting to El Paso County due to subdivision plat notes, deed restrictions, or restrictive covenants, it will be my responsibility to resolve any conflict. I hereby give permission to El Paso County, and applicable review agencies, to enter on the above described property with or without notice for the purposes of reviewing this development application and enforcing the provisions of the LDC. I agree to at all times maintain proper facilities and safe access for inspection of the property by El Paso County while this application is pending.

Owner (s) Signature: Tish A. Norman Date: 4-27-22

Owner (s) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant (s) Signature: Tish A. Norman Date: 4-27-22

**EXHIBIT A**

<b>LOT/TRACT OWNER</b>	<b>WOODMOOR GREENS LOT #</b>	<b>SOUTH WOODMOOR PRESERVE FILING NO. 1 TRACT #</b>	<b>OLD TAX SCHEDULE NUMBERS</b>	<b>NEW TAX SCHEDULE NUMBERS</b>	<b>ADDRESS BASED ON COUNTY RECORDS</b>
ABAIR, PAUL H & BRANDI D	490	490	71231-02-026	71231-02-055	1635 BOWSTRING RD
CAMPBELL, AMY A & DAVID H	419	419	71242-01-006	71242-01-020	780 W CARIBOU DR
HEINS, DOUGLAS A & MICHELLE E	506	506	71231-02-010	71231-02-060	1355 BOWSTRING RD 17320 CLOVERLEAF RD
KING, CORY DEAN	463	463	71242-03-011	not assigned	
RAMIREZ, DIANA V LUCKERT & DAVID	360	360	71133-02-014	71133-02-091	825 BOWSTRING RD
SANCHEZ, RICARDO & YVONNE	487	487	71231-02-029	71231-02-054	1665 BOWSTRING RD
SCHNELKER, ANTHONY A & JAMIE ANN	500	500	71231-02-042	71231-02-057	1465 BOWSTRING RD
STEVENS, CRAIG B & KATRINA L MILLER-	436	436	71133-02-048	71133-02-064	1090 W CARIBOU DR
WILLIAMS, REBECCA LYNN & DONALD M	551	551	71231-02-037	71231-02-069	17340 LEGGINS WAY