

Planning and Community Development Department
2880 International Circle, Colorado Springs, CO 80910
Phone 719.520.6300 | Fax 719.520.6695 | www.elpasoco.com

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

550 D:	. 71	To Application Form (1-2B)
Please che	eck the applicable application type	
ma ( , , odc	II I CUI CST TOMILITAD COMMISSION	PROPERTY INFORMATION: Provide information to identify properties and the proposed development. Attached additional above the properties and
separate a	ipplication form):	the proposed development. Attached additional sheets if necessary.
☐ Administra	ative Relief	Description of occasion,
. Certificate	e of Designation, Minor	Property Address(es): 1095 WESTERN D-
☐ Site Deve	dopment Plan, Major	1095 WESTERN W
☐ Site Deve	lopment Plan, Minor	Dal Car a a a a
□ CMRS Co	-Location Agreement	Tax ID/Parcel Number (95 Co 80915
☐ Condomin	nium Plat	Tax ID/Parcel Numbers(s) Parcel size(s) in Assess
☐ Crystal Pa	ark Dist	
☐ Fady Grad	ling Bossess	54080-03-613 107.2
Preliminary	ding Request associated with a	701.8
☐ Maintenan	ice Agreement	Existing Land Use/Development: Zoning District:
☐ Minor PUD	) Amandment	3 -1-41/04
☐ Resubmitts	of Applications and a second	Mobile Home Park MHP (AD-O
□ Road or So	al of Application(s) (>3 times)	Mobile Home Park MHP (AD-O
□ Road or Fa	icility Acceptance, Preliminary	The mill do
☐ Townhome	collity Acceptance, Final	Charles this !
<b>製酒</b>	(C) (C) (C) (C)	Check this box if Administrative Relief is being requested in
Administrative	Special Use (mark one)	
₽ ∟ ∈xteno	ded Family Dwelling	Administrative Relief request form.
☐ Tempo	prary Mining or Batch Plant	LI Check this box if any Waissers
Oil and	d/or Gas Operations	☐ Check this box if any Waivers are being requested in association with this application for development and attach a completed
☐ Rural F	Home Occupation	Waiver source for development and attach a completed
☐ Tower	Renoval	
☐ Other	, toriewal	PROPERTY OWNER INFORMATION
547		PROPERTY OWNER INFORMATION: Indicate the person(s) or organization(s) who own the person(s)
Construction Di	rawing Review and Permits (mark one)	organization(s) who own the property proposed for development.  Attached additional sheets if there are multiple.
(Pp: Dad	od Construction i training	Attached additional sheets if there are multiple property owners.
- whelighle	ent	Nome (1-1) (
LI Review	of Construction Drawings	Name (Individual or Organization):
LI Constru	ction Permit	The Springs mobile Home Communy
☐ Major Fi	inal Plat	LIVE Springs Mobile Line 1
☐ Minor St	ubdivision with	Mailing Address:
Improve	ments	
LI Site Devi	elopment Plan, Major	1095 WESTERN Or Co lo Springs Co 80915  Daytime Telephone: Fax:
U Site Deve	elopment Plan, Minor	1013 WESTERN UT CO 10 SANICC TO COGIC
Li Early Gra	ading or Grading	Daytime Telephone: Fav.
☐ ESQCP		719-574-4880
Minor Vacations	(mark one)	119-014-4880
Vacation of Interior Lat Ling(s)		Email or Alternative Contact Information:
E Guilty, Dra	RIDAGE or Sidework	To Connact Information:
: casemei	nts	FGonzales Toberts resorts. com.
☐ Sight Visit	bility	1 1000 151 COM.
☐ View Com	idor	
☐ Other:		Depart the same
Other:		Description of the request: (attach additional sheets if necessary):
This application	S	( distant adolitional sheets if necessary):
required auton	form shall be accompanied by all	WE ARE SEEKING A 20%
required support	materials.	THE SEEKING A ///
		1000
Kara P	DOD AS	ADMINISTRATIVE RELIEF VARIANCE
	PCD Office Use:	WELLET VARIANCE
ate:	File:	FOR LOT 5791 & 210D AT THE
		TUT TUE
op'd D		Samuel Marine
ec'd By:	Receipt #:	Springs Mobile Home Park.
		- I AKKI
SD File#:		
	1	

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APPLICANT(s): Indicate person(s) submitting the application if different necessary).  Name (Individual or Organization):	
Name (Individual or Organization):	of than the property owner(s) (attach additional sheets if
Mailing Address;	
9770	
Daytime Telephone: RAINTREE DR. SCOTTS	DALE, AZ 85210
60/-188-541E	DATE: HZ 02660
Email or Afternative Contact Information:	
AUTHORIZED BEDDE COM	
Authorized Representative(s): Indicate the person(s) authorized to Name (Individual or Organization):	
Name (Individual or Organization):	represent the property owner and/or applicants
Mailing Address:	
Michilia Address:	
Daytime Telephone:	30927
1/917,0000 Fax:	10172
Email or Alternative Contact less	1
AUTHORIZATION FOR OWNER'S ARTHUR AUTHORIZATION FOR OWNER'S AUTHORIZATION FO	
An our - I	
An owner signature is not required to process a Type A or B Development Application or an authorized representative where the application is accompanied by a Owner/Applicant Authorization:  Owner/Applicant Authorization:	ation, An owneds signed
OWNER/APPLICANT AUTHORIZATION:	a completed Authority to Represent/Owner's Assignment
complete of my knowledge, the information on the	
have familiarized myself with the rules are the table of any information on this	or supplemental documentation is to a
complete. I am fully aware that any misrepresentation of any information on this application and all additional have familiarized myself with the rules, regulations and procedures with respect to application and may be revoked on any breach of representation or condition(s) or materials to allow a complete review and that any approval of this application and may be revoked on any breach of representation or condition(s) or materials to allow a complete review and reasonable propriate to this project, and if the project and its project a	application may be grounds for denial or revocation.
materials as part of this application or representation or condition(s)	form is based on the representations made understand
all condition in application not being accepted an extermination of conformance	authorited that failure to submit all at the
are a right or obligation transferable by El Paso County. I understand that such	eded to review the project. I hereby and ordinances
substitution plat notes deed matter acknowledge that I understand the	sometions shall apply to the cubication agree to abide by
a result of subdivision plat notes, deed restrictions, or restrictive covenants. I agree any conflict. I hereby give permission to El Paso County due to subdivision plat notes, deed restrictions, or restrictive covenants. I agree any conflict. I hereby give permission to El Paso County, and applicable review agree maintain proper facilities and safe access for inspection of the property by El Paso County.	that if a conflict should result from the request I am
maintain proper facilities and safe access for inspection and applicable review ag	encies, to enter on the above described pressure
or without notice for the purposes of reviewing this development applicable review ag maintain proper facilities and safe access for inspection of the property by El Paso (Owner (s) Signature:	County while this application to a gree to at all times
Owner (s) Signature:	Date: 9.10-7070
	1 10 2020
Applicant (s) Signature:	Date:
	Date: 9-10-2020
<b>V</b>	
	Type C Ap-
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