



2880 International Circle, Suite 110  
Colorado Springs, CO 80910  
Phone: 719-520-6300  
Email: Stormwater@elpasoco.com  
[publicworks.elpasoco.com/stormwater/](http://publicworks.elpasoco.com/stormwater/)

Stormwater Permit Number: ESQ

**EL PASO COUNTY**  
**STORMWATER PERMIT FORM**  
**Erosion and Stormwater Quality Control Permit (ESQCP)**

**EPC Project Number:** \_\_\_\_\_

There are multiple Stormwater Permits. Please refer to Engineering Criteria Manual (ECM) Appendix I to determine which permit is applicable to your project.

This form initially acts as the permit application. Only once this form has been signed & approved, all other required documents have been submitted & approved, and the Notice to Proceed has been issued, does this form become an active permit.

<b>Part I. Property Owner or Authorized Representative (Co-Permit Holder)</b>	
Company/Organization	
Name or Name of Representative	
Title	
Physical Address (not PO Box)	
Street Number and Street Name	
City, State, Zip Code	
Mailing Address (if differs from above)	
Street Number and Street Name	
City, State, Zip Code	
Phone Number - Office	
Phone Number - Cell	
Email Address	

<b>Part II. Contractor/Operator (Co-Permit Holder)*</b>	
Company/Organization	
Name or Name of Representative	
Title	
Physical Address (not PO Box)	
Street Number and Street Name	
City, State, Zip Code	
Mailing Address (if differs from above)	
Street Number and Street Name	
City, State, Zip Code	
Phone Number - Office	
Phone Number - Cell	
Email Address	

\*This section can be left blank through design review but must be filled in no later than at the Pre-Con Meeting.



2880 International Circle, Suite 110  
 Colorado Springs, CO 80910  
 Phone: 719-520-6300  
 Email: Stormwater@elpasoco.com  
[publicworks.elpasoco.com/stormwater/](http://publicworks.elpasoco.com/stormwater/)

Stormwater Permit Number: ESQ

**EL PASO COUNTY**  
**STORMWATER PERMIT FORM**  
**Erosion and Stormwater Quality Control Permit (ESQCP)**

EPC Project Number: \_\_\_\_\_

<b>Part III. Qualified Stormwater Manager (QSM)*</b>	
Company/Organization	
Name	
Phone Number - Office	
Phone Number - Cell	
Email Address	

\*This section can be left blank through design review but must be filled in no later than at the Pre-Con Meeting.

<b>Part IV. Project Information</b>	
Project Name	
Address (or nearest major cross streets)	
Acreage	Total:            acres Proposed Disturbance:            acres
Description of Project	
Schedule (input estimated month or season)	Start of Construction: Completion of Construction: Final Stabilization:



2880 International Circle, Suite 110  
Colorado Springs, CO 80910  
Phone: 719-520-6300  
Email: Stormwater@elpasoco.com  
[publicworks.elpasoco.com/stormwater/](http://publicworks.elpasoco.com/stormwater/)

Stormwater Permit Number: ESQ

**EL PASO COUNTY**  
**STORMWATER PERMIT FORM**  
**Erosion and Stormwater Quality Control Permit (ESQCP)**

**EPC Project Number:** \_\_\_\_\_

**REQUIRED SUBMISSIONS**

See ECM Appendix I for the documentation required to be submitted, reviewed, and approved in conjunction with this Stormwater Permit Form.

**RESPONSIBILITY FOR DAMAGE**

The County and its officers and employees, including but not limited to the ECM Administrator, shall not be answerable or accountable in any manner for damage to property or for injury to or death of any person, including but not limited to the Permit Holder(s), persons employed by the Permit Holder(s), or persons acting on behalf of the Permit Holder(s), from any cause. The Permit Holder(s) shall be responsible for any liability imposed by law and for damage to property or injuries to or death of any person, including but not limited to the Permit Holder(s), persons employed by the Permit Holder(s), and persons acting on behalf of the Permit Holder(s), arising out of work or other activity permitted and done under a permit, or arising out of the failure to perform the obligations under any permit with respect to maintenance or any other obligations, or resulting from defects or obstructions, or from any cause whatsoever during the progress of the work or other activity, or at any subsequent time work or other activity is being performed under the obligations provided by and contemplated by the permit.

The Permit Holder(s) shall indemnify, save, and hold harmless the County and its officers and employees, including but not limited to the Board of County Commissioners (BoCC) and ECM Administrator, from all claims, suits or actions of every name, kind and description brought for or on account of damage to property or injuries to or death of any person, including but not limited to the Permit Holder(s), persons employed by the Permit Holder(s), persons acting in behalf of the Permit Holder(s) and the public, resulting from the performance of work or other activity under the permit, or arising out of the failure to perform obligations under any permit with respect to maintenance or any other obligations, or resulting from defects or obstructions, or from any cause whatsoever during the progress of the work or other activity, or at any subsequent time work or other activity is being performed under the obligations provided by and contemplated by the permit, except as otherwise provided by state law. The Permit Holder(s) waives any and all rights to any type of expressed or implied indemnity against the County, its officers or employees. It is the intent of the parties that the Permit Holder(s) will indemnify, save, and hold harmless the County, its officers and employees from any and all claims, suits or actions as set forth above regardless of the existence or degree of fault of or negligence, whether active or passive, primary or secondary, on the part of the County, the Permit Holder(s), persons employed by the Permit Holder(s), or persons acting in behalf of the Permit Holder(s).



2880 International Circle, Suite 110  
 Colorado Springs, CO 80910  
 Phone: 719-520-6300  
 Email: Stormwater@elpasoco.com  
[publicworks.elpasoco.com/stormwater/](http://publicworks.elpasoco.com/stormwater/)

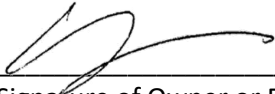
Stormwater Permit Number: ESQ

**EL PASO COUNTY**  
**STORMWATER PERMIT FORM**  
**Erosion and Stormwater Quality Control Permit (ESQCP)**

**EPC Project Number:** \_\_\_\_\_

**APPLICATION AND PERMIT CERTIFICATION – PERMIT HOLDERS**

We, as the Permit Holder(s), hereby certify that this application is correct and complete as per the requirements presented in the El Paso County Engineering Criteria Manual (ECM) and Drainage Criteria Manual (DCM) Volume 2. We, as the Permit Holder(s), have read and will comply with all of the requirements of the submitted Stormwater Management Plan (SWMP), Grading & Erosion Control (GEC) Plan, and any other documents specifying construction control measures to be used on the site, including permit conditions that may be required by the ECM Administrator. We understand that the approved plans are an enforceable part of the ESQCP. We further understand that we are to comply with all requirements set forth by the ECM and DCM Volume 2. We understand that the permitted area is that which is shown as the Limits of Disturbance on the GEC Plans. We further understand that a Construction Permit must be obtained and all necessary construction control measures are to be installed in accordance with the SWMP, GEC Plan, ECM, and DCM Volume 2 before land disturbance begins and that failure to comply will result in a Stop Work Order and may result in other penalties as allowed by law. We understand that the construction control measures are to be maintained on the site and be modified as necessary to protect stormwater quality as the project progresses. We further understand and agree to indemnify, save, and hold harmless the County and its officers and employees, including but not limited to the BoCC and ECM Administrator, from all claims, suits or actions of every name, kind and description as outlined in Responsibility for Damage section above.

  
 \_\_\_\_\_  
 Signature of Owner or Representative

June 11, 2026  
 \_\_\_\_\_  
 Date

Grant Langdon for Antler Range LLC  
 \_\_\_\_\_  
 Print Name of Owner or Representative

\_\_\_\_\_  
 Signature of Contractor/Operator or Representative\*  
 \*If signed by a Rep, an Affidavit of Signature Authority must be included

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print Name of Contractor/Operator or Representative

**APPLICATION AND PERMIT CERTIFICATION – EL PASO COUNTY**

The following signature from the ECM Administrator signifies the approval of this ESQCP Application.

\_\_\_\_\_  
 Signature of ECM Administrator

\_\_\_\_\_  
 Date