

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)

Please check the applicable application type (Note: each request requires completion of a separate application form):	PROPERTY INFORMATION: Provide information to identify properties and the proposed development. Attached additional sheets if necessary.	
	Property Address(es):	*
□ Appeal		
□ Approval of Location □ Board of Adjustment	Dines Blvd.	
☐ Certification of Designation		
☐ Const. Drawings, Minor or Major	Tax ID/Parcel Numbers(s)	Parcel size(s) in Acres:
□ Development Agreement		
☑ Final Plat, Minor or Major	5233301002	30.544
☐ Final Plat, Amendment		
☐ Minor Subdivision	Existing Land Use/Development:	Zoning District:
□ Planned Unit Dev. Amendment, Major	Vacant Residential	RS-5000
□ Preliminary Plan, Major or Minor		
☐ Rezoning		
☐ Road Disclaimer	☐ Check this box if Administrative Relief is being requested in	
☐ SIA, Modification	association with this application and attach a completed	
☐ Sketch Plan, Major or Minor	Administrative Relief request form.	
☐ Sketch Plan, Revision	 Check this box if any Waivers are being requested in association with this application for development and attach a completed 	
☐ Solid Waste Disposal Site/Facility		
☐ Special District	Waiver request form.	omeni and attach a completed
Special Use	waiver request form.	
□ Major □ Minor, Admin or Renewal		
□ Subdivision Exception	PROPERTY OWNER INFORMATION: Indicate the person(s) or	
Vacation	organization(s) who own the property proposed for development.	
☐ Plat Vacation with ROW	Attach additional sheets if there are multiple property owners.	
☐ Vacation of ROW	/ maon additional onlocks in there are	manple property ewilers.
Variances	Name (Individual or Organization):	
□ Major		
☐ Minor (2 nd Dwelling or	SR Land LLC.	
Renewal) □ Tower, Renewal	Mailing Address:	
	Mailing Address.	
☐ Vested Rights ☐ Waiver or Deviation	20 Boulder Crescent St. Suite 102, C/S, C) 80903	
□ Waiver of Subdivision Regulations		
□ WSEO	Daytime Telephone:	Fax:
L WOLG		
□ Other:		
= 1 = 2 ×	Email or Alternative Contact Informati	on:
This application form shall be accompanied by all required support materials.		
5 DOD 0// 11		
For PCD Office Use:	Description of the request: (sub	mit additional sheets if necessary):

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

Final Plat for Branding Iron filing 2 including 75 single family lots; 1 tract for drainage, landscaping, public improvement easement, public utilities easement; and 1 tract for a future school site.



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

necessary)			
Name (Individual or Organization): SR Land LLC			
Mailing Address: 20 Boulder Crescent Suite 102, Colorado Springs, CO. 80903			
Daytime Telephone:	Fax:		
Email or Alternative Contact Information:			
AUTHORIZED REPRESENTATIVE(s): Indicate the person(s) au (attach additional sheets if necessary).	thorized to represent the property owner and/or applicants		
Name (Individual or Organization): N.E.S. Inc.			
Mailing Address: 619 N. Cascade Ave suite 200, Colorad	o Springs, CO. 80903		
Daytime Telephone: 719-471-0073	Fax:		
Email or Alternative Contact Information: eganaway@nescolorado.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 informave familiarized myself with the rules, regulations and procedures 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 the materials to allow a complete review and reasonable determination may result in my application not being accepted or may extend the lall conditions of any approvals granted by El Paso County. I under are a right or obligation transferable by sale. I acknowledge that I a result of subdivision plat notes, deed restrictions, or restrictive consubmitting 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 property of the purposes. Owner (s) Signature:	r condition(s) of approval. I verify that I am submitting all of the his project, and I acknowledge that failure to submit all of the necessary of conformance with the County's rules, regulations and ordinances ength of time needed to review the project. I hereby agree to abide by stand that such conditions shall apply to the subject property only and understand the implications of use or development restrictions that are ovenants. I agree that if a conflict should result from the request I am strictions, or restrictive covenants, it will be my responsibility to resolve licable review agencies, to enter on the above described property with polication and enforcing the provisions of the LDC. I agree to at all times party by El Paso County while this application is pending. Date: Date:		
Applicant (s) Signature:	Date: 2/25/2020		