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Planning and Community Development Department

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

APR 19 2013



	, ipplication (120)	BY:
Please check the applicable application type (Note: each request requires completion of a separate application form):	PROPERTY INFORMATION: Provide into the proposed development. Attached	
☐ Appeal ☐ Approval of Location ☐ Board of Adjustment	Property Address(es): Davis Ranch Subdivision Letter Attached	
☐ Certification of Designation ☐ Const. Drawings, Minor or Major ☐ Development Agreement ☐ Final Plat, Minor or Major Final Plat, Amendment	Tax ID/Parcel Numbers(s) Letter Attached	Parcel size(s) in Acres:
☐ Minor Subdivision ☐ Planned Unit Dev. Amendment,	Existing Land Use/Development:	Zoning District: Select zoning district
□ Rezoning □ Road Disclaimer □ SIA, Modification □ Sketch Plan, Major or Minor □ Sketch Plan, Revision □ Solid Waste Disposal Site/Facility □ Special District Special Use □ Major □ Minor, Admin or Renewal	 Check this box if Administration association with this application Administrative Relief request for Check this box if any Waivers with this application for develop Waiver request form. 	n and attach a completed orm. are being requested in association
□ Subdivision Exception Vacation □ Plat Vacation with ROW □ Vacation of ROW	PROPERTY OWNER INFORMATION: Indicate the person(s) or organization(s) who own the property proposed for development. Attach additional sheets if there are multiple property owners. Name (Individual or Organization): Mailing Address:	
Variances □ Major □ Minor (2 nd Dwelling or Renewal) □ Tower, Renewal		
☐ Vested Rights ☐ Waiver or Deviation	2365 Terri Lee Dr. Peyton, CO	
☐ Waiver of Subdivision Regulations ☐ WSEO ☐ Other:	Daytime Telephone: 9251 Cell 719-623-9251 Cell 719-382-5930 Hom	0
This application form shall be accompanied by all required support materials.	Email or Alternative Contact Information Solve 1 1009	on: Daol.com
For PCD Office Use:	Description of the request: (sub	
Date: File ;	Final Plat Ame	
Rec'd By: Receipt #:	(Let	ter Attached)
DSD File #:		



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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): Davis Ranch Subdivision Filing 2
Mailing Address:
2365 Terri Lee Prive, Peyton, LO 00001
Daytime Telephone:
719-382-5930
Email or Alternative Contact Information:
50ne112809@ 201.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):
and the same of th
2365 Terri Lee Dr. Peyton, CD 80801
Daytime Telephone: Fax:
7/9-382-5930
Email or Alternative Contact Information:
sone112009@a.ol.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 of Apply to ANT AUTHORIZATION?
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 b
Owner (s) Signature: Date:
Owner (s) Signature: Date:
Applicant (s) Signature: Michael WSIef Date: 4/15/18