

## 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)

|   |                        | and the second s |                                       |  |
|---|------------------------|--|---------------------------------------|--|
| Please check the applic                       | cable application type | December International December in   | formation to identify proportion and  |  |
| (Note: each request requires completion of a  |                        | PROPERTY INFORMATION: Provide information to identify properties and   |                                       |  |
| separate application form):                   |                        | the proposed development. Attached additional sheets if necessary.   |                                       |  |
|   |                        | Property Address(es):  |                                       |  |
| ☐ Appeal                                      |                        |  |                                       |  |
| ☐ Approval of Location                        |                        | 12730 Bridle Bit Rd, Colorado Springs, CO 80908  |                                       |  |
| ☐ Board of Adjustment                         |                        | 12700 Bridio Bit I ta, Goldrado  | opgo, o o occoo                       |  |
| ☐ Certification of Designation                |                        | Tax ID/Parcel Numbers(s)   | Parcel size(s) in Acres:              |  |
| ☐ Const. Drawings, Minor or Major             |                        | Tax 15/1 arcel 14dilibers(3)   | 1 41001 3120(3) 111 710103.           |  |
| ☐ Development Agreement                       |                        | 6210001011   | 10.12                                 |  |
| ☐ Final Plat, Minor or Major                  |                        | 0210001011   | 10.12                                 |  |
| ☑ Final Plat, Amendment                       |                        | Eviational and Han (Development)   | Zanina District                       |  |
| ☐ Minor Subdivision                           |                        | Existing Land Use/Development:   | Zoning District:                      |  |
| ☐ Planned Unit Dev. Amendment,                |                        | Cinale Femile Desidence  | RR-5                                  |  |
| Major   |                        | Single Family Residence  | RR-5                                  |  |
| ☐ Preliminary Plan, Major or Minor            |                        |  |                                       |  |
| ☐ Rezoning                                    |                        |  |                                       |  |
| ☐ Road Disclaimer                             |                        | □ Check this box if Administrat  | ive 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                       |                        |  |                                       |  |
| ☐ Solid Waste Disposal Site/Facility          |                        | ☐ Check this box if any <b>Waivers</b> are being requested in association  |                                       |  |
| □ Special District                            |                        | with this application for development and attach a completed   |                                       |  |
| Special Use                                   |                        | Waiver request form.   |                                       |  |
| ☐ Major                                       |                        |  |                                       |  |
| ☐ Minor, Admin or Renewal                     |                        | D  |                                       |  |
| ☐ 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  | e multiple property owners.           |  |
| ☐ Vacation of ROW                             |                        |  |                                       |  |
| Variances                                     |                        | Name (Individual or Organization):   |                                       |  |
| ☐ Major                                       |                        |  |                                       |  |
| ☐ Minor (2 <sup>nd</sup> Dwelling or          |                        | Nicci Telle  |                                       |  |
| Renewal)                                      |                        |  |                                       |  |
| ☐ Tower, Renewal                              |                        | Mailing Address:   |                                       |  |
| ☐ Vested Rights                               |                        | 12730 Bridle Bit Rd, Colorado Springs, CO 80908  |                                       |  |
| ☐ Waiver or Deviation                         |                        | 12730 Bridle Bit Nd, Colorado Springs, CO 00300  |                                       |  |
| ☐ Waiver of Subdivision Regulations           |                        | Daytime Telephone:   | Fax:                                  |  |
| □WSEO   |                        |  | N. Severe                             |  |
|   |                        | 719 332 0238   | None                                  |  |
| □ Other:                                      |                        | F 1 All 1 O 1 1 1 1  | P                                     |  |
|   |                        | Email or Alternative Contact Information:  |                                       |  |
| This application form shall be accompanied by |                        | ntelle@dimensionconsulting.com   |                                       |  |
| all required support materials.               |                        | The lie control of the chartering.   | 50111                                 |  |
|   |                        |  |                                       |  |
| For PCD                                       | Office Use:            | Description of the request: (su  | bmit additional sheets if necessary): |  |
|   |                        |  |                                       |  |
| Date:   | File:                  |  |                                       |  |
|   |                        |  |                                       |  |
| Rec'd By:                                     | Receipt #:             | 1  |                                       |  |
| Nec u by.                                     | Neceipt #.             | Divide existing 10 acre lot into   | two (2) 5 acre lots.                  |  |
|   |                        |  |                                       |  |
| 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): Nicci Telle

Mailing Address: 12730 Bridle Bit Rd, Colorado Springs, CO 80908 Daytime Telephone: None 719 332 0238 Email or Alternative Contact Information:

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): Whitehead Engineering, LLC Mailing Address: P. O. Box 1551, Colorado Springs, CO 80901 Fax: Daytime Telephone: None 719-237-4411 Email or Alternative Contact Information: david@whiteheadengineering.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:                    | Date: 10/27/2020 | _ |
|---|------------------|---|
| Owner (s) Signature:                    | Date:            | _ |
| Applicant (s) Signature: David Chitches | Date: 10/27/2020 | _ |