

EL PASO COUNTY



COLORADO

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PLANNING AND COMMUNITY DEVELOPMENT DEPARTMENT
CRAIG DOSSEY, EXECUTIVE DIRECTOR

*mailed
3/29/19
TL*

March 28, 2019

TO: HCB Willow Springs, LLC
11111 W. 925th Street
Overland Park, KS 66214-1824

RE: Request for cost recovery for offsite improvements, Forest Lakes Drive

Please be advised that there has been a cost recovery statement submitted to the El Paso County (EPC) Planning and Community Development Department that has outlined parcels as having a benefit to their construction of Forest Lakes Drive.

The cost recovery statement has identified the following parcels, owned by HCB, as having a potential benefit:

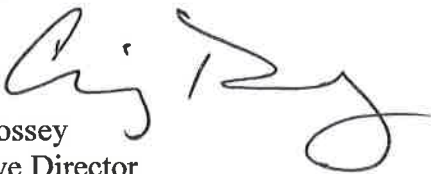
- EPC TSN 7127000003
- EPC TSN 7126000041

The cost recovery statement and associated documentation is currently under review. You will be notified at such time that an approval (and any associated value) or denial has been determined.

The submitted documentation will be reviewed pursuant to the El Paso County Land Development Code Section 8.7.2.

Please contact Elizabeth Nijkamp, 719-520-7852 with any questions that you may have.

Sincerely,



Craig Dossey
Executive Director
Planning and Community Development Department

2880 INTERNATIONAL CIRCLE, SUITE 110
PHONE: (719) 520-6300

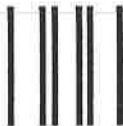


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Total Postage and Fees	\$
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Street and Apt. No., or PO Box No.	11111 W 925th Street
City, State, ZIP+4®	Overland Park KS 66214-1824
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

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• Sender: Please print your name, address, and ZIP+4® in this box•

EPC Planning and Community Development
2880 International Circle, Suite 110
Colorado Springs, CO 80910

Forest Lake Drive
Attn: Elizabeth Wiskamp

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

HCB Willow Springs LLC
11111 W. 925th Street
Overland Park, K
66214-1824



9590 9402 3064 7124 9581 84

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

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