

Planning and Community Development Department

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

Application Form

Please check the applicable application type (Note: each request requires completion of a separate application form):	PROPERTY INFORMATION: Provide in and the proposed development. An necessary.	
 ☐ Administrative Determination ☐ Administrative Relief ☐ Appeal ☐ Approval of Location ☐ Billboard Credit 	Property Address(es):	
 □ Board of Adjustment – Dimensional Variance □ Certificate of Designation □ Combination of Contiguous Parcels by Boundary Line Adjustment 	Tax ID/Parcel Numbers(s)	Parcel size(s) in Acres:
☐ Construction Drawings ☐ Condominium Plat ☐ Crystal Park Plat ☐ Development Agreement ☐ Fasts Conding Parsent	Existing Land Use/Development:	
 ☐ Early Grading Request ☐ Final Plat ☐ Maintenance Agreement ☐ Merger by Contiguity ☐ Townhome Plat 	Existing Zoning District:	Proposed Zoning District (if applicable):
 ☐ Planned Unit Development ☐ Preliminary Plan ☐ Rezoning ☐ Road Disclaimer ☐ Road or Facility Acceptance 	<u>Property Owner Information</u> : Indicate the person(s) or organization(s) who own the property proposed for development. Attach additional sheets if there are multiple property owners.	
 ☐ Site Development Plan ☐ Sketch Plan ☐ Solid Waste Disposal Site/Facility ☐ Special District ☐ Special Use 	Name (Individual or Organization): Mailing Address:	
□ Subdivision Exemption □ Subdivision Improvement Agreement □ Variance of Use	Daytime Telephone:	
□ WSEO □ Other:		
This application form shall be accompanied by all required support materials.	Email or Alternative Contact Inform	nation:
SCRIPTION OF THE REQUEST: (attach additional sheet	's if necessary):	



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<u>APPLICANT(s):</u> Indicate person(s) submitting the application if different than the property owner(s) (attach additional sheets if necessary).

necessary).			
Name (Individual or Organization):			
Mailing Address:			
Daytime Telephone:	Email or Alternative Contact Information:		
AUTHORIZED REPRESENTATIVE(s): Indicate the person(s) authori	zed to represent the property owner and/or applicants (attach		
additional sheets if necessary).			
Name (Individual or Organization):			
Mailing Address:			
Daytime Telephone:	Email or Alternative Contact Information:		
AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVE(S):			
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			
	ed on any breach of representation or condition(s) of approval. I		
verify that I am submitting all of the required materials as part of			
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 conflict. I hereby give permission to El Paso County, and applications			
	oment application and enforcing the provisions of the LDC. I agree		
	ection of the property by El Paso County while this application is		
pending.	cettor of the property by Erruso county wine this application is		
Owner (a) Signature	2/ Data: 9/18/01/		
Owner (s) Signature:	Date:		
Owner (c) Signature:	Date		
Owner (s) Signature:	Date:		
Applicant (c) Signature:			