

Adjacent Property Owners List w/ Mailing Addresses (60172) 1724-28 Hampton South:

EAST NEIGHBOR:

Schedule No.: 6505408025
Jung Ashley
3207 Austin Pl
Colorado Springs, CO 80909

WEST NEIGHBOR:

Schedule No.: 6505408028
Bret L. Fitzgerald
3396 Logstone Dr.
Triangle, VA 22172

SOUTH NEIGHBORS:

Schedule No.: 6505410001
Derick W. Moellenbeck
2119 Pinnacle Terrace Way #105
Salt Lake City, UT 84121

Schedule No.: 6505409002
STG Alegre Properties LLC
15 Avenda Fontana
San Clemente, CA 92673

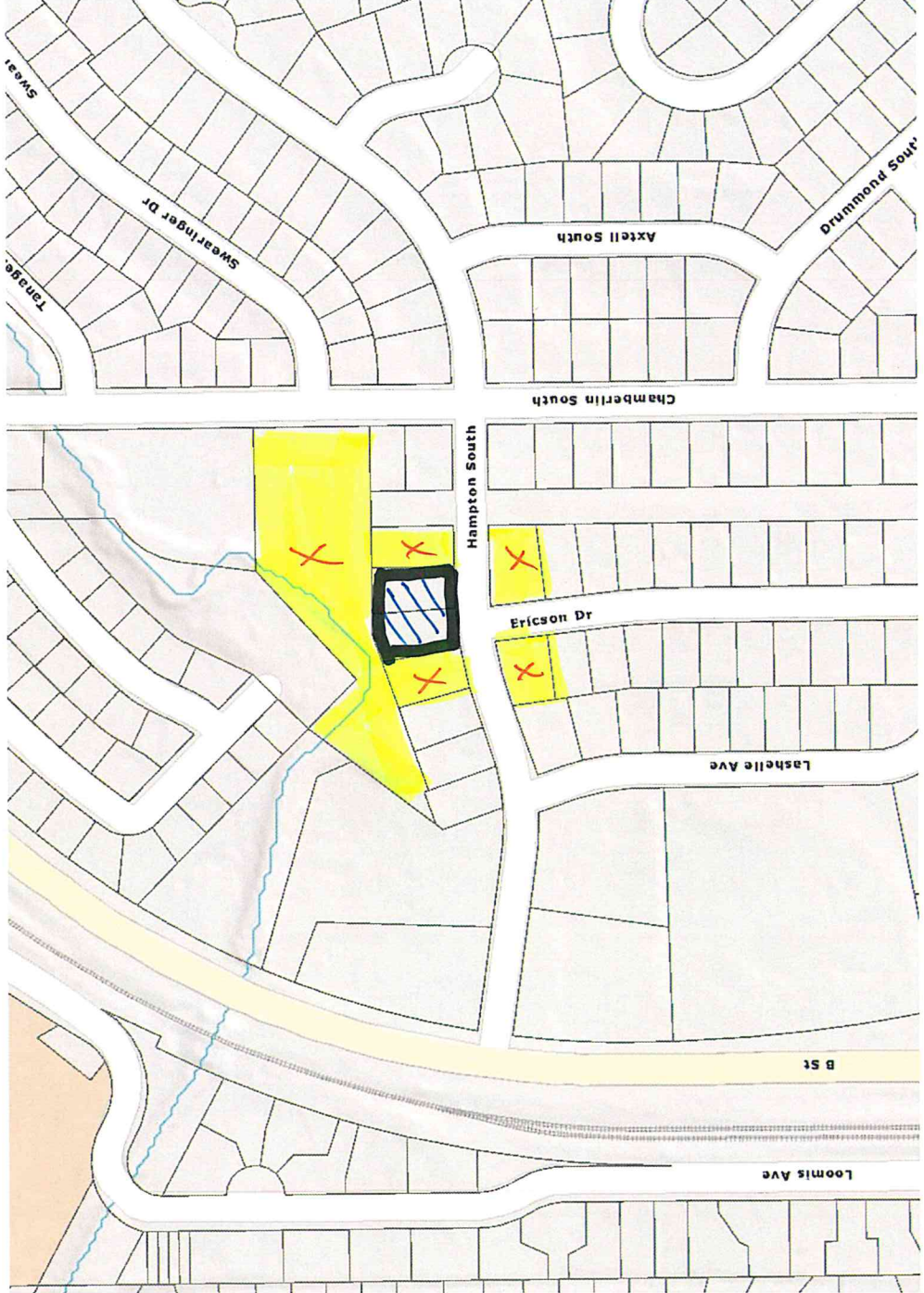
NORTH NEIGHBOR:

Schedule No.: 6504300029
David Ruley
5777 Leetsdale Dr
Denver, CO 80224

El Paso County Assessor's Office



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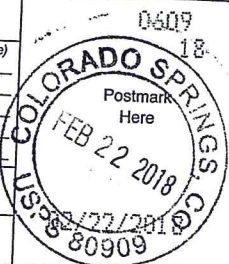
OFFICIAL USE

TRIANGLE, VA 22172

Certified Mail Fee	\$3.45
Extra Services & Fees (check box, add fee as appropriate)	\$7.75
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.50
Total Postage and Fees	\$6.70

Sent To: **FITZGERALD**
 Street and Apt. No., or PO Box No.: **3390 LOGSTONE DR.**
 City, State, ZIP+4®: **TRIANGLE, VA 22172**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



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OFFICIAL USE

SAN CLEMENTE, CA 92673

Certified Mail Fee	\$3.45
Extra Services & Fees (check box, add fee as appropriate)	\$7.75
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.50
Total Postage and Fees	\$6.70

Sent To: **STG ALEGRE PROPERTIES LLC**
 Street and Apt. No., or PO Box No.: **15 AVENIDA FONTANA**
 City, State, ZIP+4®: **SAN CLEMENTE, CA 92673**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



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OFFICIAL USE

DENVER, CO 80224

Certified Mail Fee	\$3.45
Extra Services & Fees (check box, add fee as appropriate)	\$7.75
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.50
Total Postage and Fees	\$6.70

Sent To: **RULEY**
 Street and Apt. No., or PO Box No.: **5177 LEETSONE DR.**
 City, State, ZIP+4®: **DENVER, CO 80224**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



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OFFICIAL USE

COLORADO SPRINGS, CO 80909

Certified Mail Fee	\$3.45
Extra Services & Fees (check box, add fee as appropriate)	\$7.75
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.50
Total Postage and Fees	\$6.70

Sent To: **Jung Ashley**
 Street and Apt. No., or PO Box No.: **3207 Austin Pl.**
 City, State, ZIP+4®: **80909**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



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OFFICIAL USE


SALT LAKE CITY, UT 84121


Certified Mail Fee	\$3.45
Extra Services & Fees (check box, add fee as appropriate)	\$7.75
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.50
Total Postage and Fees	\$6.70


Sent To: **MOE HENBECK**
 Street and Apt. No., or PO Box No.: **2119 PINNACLE TERRACE WAY #105**
 City, State, ZIP+4®: **SALT LAKE CITY, UT 84121**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Jung Ashley 3207 Austin Pl Colorado Springs, CO 80909	B. Received by (Printed Name)	C. Date of Delivery
 9590 9402 2527 6306 5872 63	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7016 1970 0000 5643 8458	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: David Ruley 5777 Leetsdale Dr Denver, CO 80224	B. Received by (Printed Name)	C. Date of Delivery
 9590 9402 2527 6306 5872 25	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7016 1970 0000 5643 8496	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Derick W. Moellenbeck 2119 Pinnacle Terrace Way #105 Salt Lake City, UT 84121	B. Received by (Printed Name)	C. Date of Delivery
 9590 9402 2527 6306 5872 49	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7016 1970 0000 5643 8489	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt

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:

STG Alegre Properties LLC
 15 Avenda Fontana
 San Clemente, CA 92673



9590 9402 2527 6306 5872 32

2. Article Number (Transfer from service label)

7016 1970 0000 5643 8465

PS Form 3811, July 2015 PSN 7530-02-000-9053

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

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Bret L. Fitzgerald
 3396 Logstone Dr.
 Triangle, VA 22172



9590 9402 2527 6306 5872 56

2. Article Number (Transfer from service label)

7016 1970 0000 5643 8472

PS Form 3811, July 2015 PSN 7530-02-000-9053

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

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt



February 20, 2018

NOTICE TO PROPERTY OWNERS

Dear Property Owner:

This letter is being sent to you because M.V.E., Inc., on behalf of GNC Bunting LLC, is proposing a land use project on the property having addresses of 1724 and 1728 Hampton South in El Paso County, Colorado. The project site is 0.49± acres in area and is located on the north side of Hampton South, about 750 feet east of B Street and about 320 feet west of Chamberlin Street as shown on the attached Vicinity Map. The subject property is zoned RM-30 (Residential Multi-Dwelling) for multi-dwelling family residential use. This information is being provided to you prior to the submittal with the County. The proposed development incorporates the properties with Tax ID numbers of 6505408034 and 6505408035. Please direct any questions on the proposal to the referenced contacts below.

The proposal is for approval of Site Development Plan, Administrative Relief and the Final Plat of Bunting Multi-Family Filing No. 1. The existing configuration consists of two parcels. The proposed replat will relocate the lot line between the two parcels and the proposed subdivision will still have two lots. This will allow the construction of two four-plex multi-family residential buildings on the site. The proposed project will provide a multi-family residential housing in accordance with the requirements of the County's RM-30 zone, similar in nature to the adjacent surrounding properties. The proposed Administrative Relief is to allow 14 parking spaces where 17 spaces are required. The proposal would provide 7 parking spaces for each of the proposed four-plex buildings, which is the same or more than the number of spaces provided on the existing four-plex buildings surrounding the site.

Prior to any public hearing on this proposal a notification of the time and place of public hearing will be sent to the adjacent property owners by the El Paso County Planning and Community Development Department. At that time you will be given the El Paso County contact information, the file number and an opportunity to respond either for, against or expressing no opinion in writing or in person at the public hearing for this proposal.

Any questions regarding this project should be directed to:

Dave Gorman, M.V.E., Inc. 1903 Lelaray Street, Suite 200, Colorado Springs, CO 80909,
(719) 635-5736, daveg@mvecivil.com

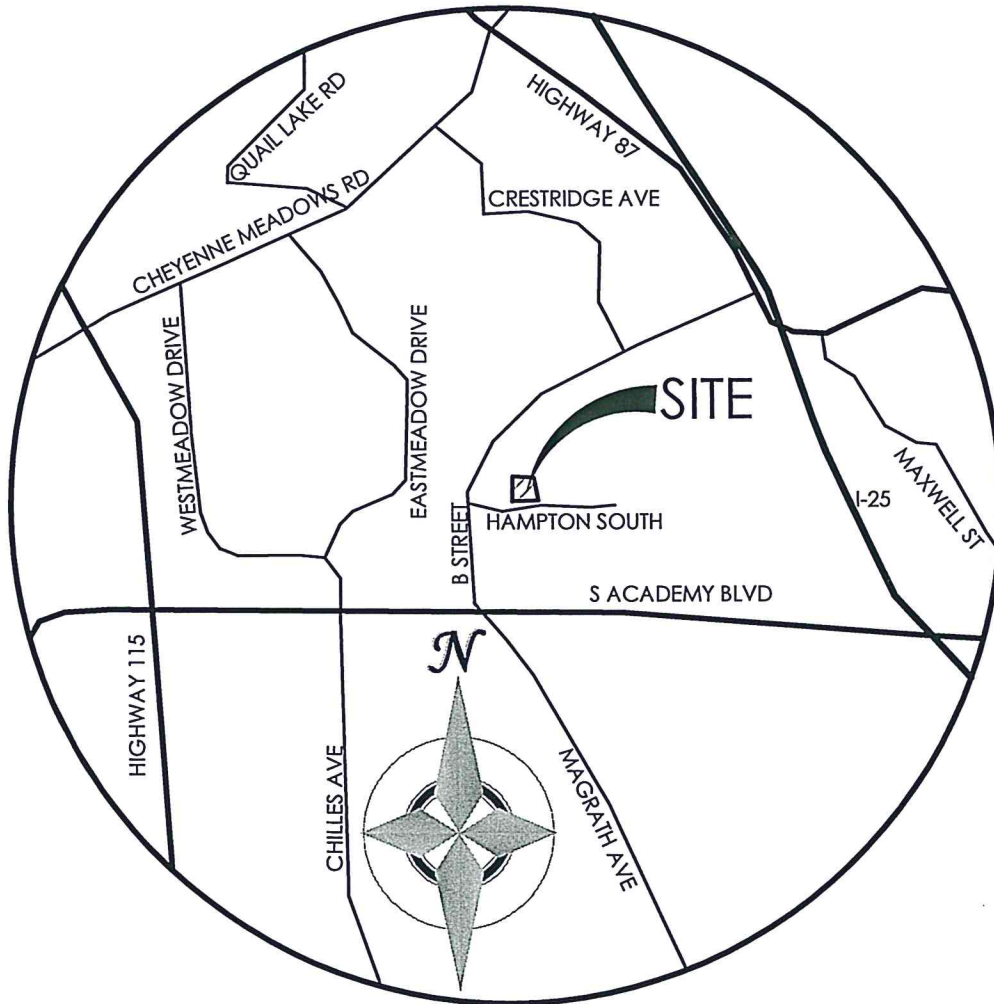
Very truly yours,

M.V.E., Inc.
David R. Gorman, P.E.

DRG:cwg

Attachment: Vicinity Map, Development Map
Z:\61072\Documents\Correspondance\61072-Final Plat Notice to Property Owners.odt

Engineers • Surveyors
1903 Lelaray Street, Suite 200 • Colorado Springs, CO 80909 • Phone 719-635-5736
Fax 719-635-5450 • e-mail mve@mvecivil.com



VICINITY MAP

NOT TO SCALE

