

DSD File #:

Planning and Community Development Department

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

Type D Application Form (1-2C)

	Please check the app	licable application type	D-			
	(Note: each request requires completion of a separate application form):		PR	PROPERTY INFORMATION: Provide information to identify properties and the proposed development. Attached additional sheets if necessary.		
	separate application i	orm):			ed additional sheets if necessary.	
	□ Appeal		Pr	Property Address(es):		
	☐ Approval of Location			10595 & 10625 Milam Road		
	☐ Board of Adjustment					
	☐ Certification of Design	ation	-	7 100		
	☐ Const. Drawings, Mine	☐ Const. Drawings, Minor or Major		x ID/Parcel Numbers(s)	Parcel size(s) in Acres:	
	□ Development Agreem		6	224004005 / 6224004006	8.10AC / 8.96AC	
	☐ Final Plat, Minor or Ma	•	0	2240040037 0224004000	0.10AC / 0.90AC	
		☑ Final Plat, Amendment		disting Land Use/Development:	Zoning District:	
	☐ Minor Subdivision☐ Planned Unit Dev. Am	onderest.		usung Land Ose/Development.	Zorling District.	
	Major	renament,	R	lesidential	RR-5	
	☐ Preliminary Plan, Majo	or or Minor			11110	
	☐ Rezoning					
	□ Road Disclaimer			 Check this box if Administrative Relief is being requested in association with this application and attach a completed Administrative Relief request form. Check this box if any Waivers are being requested in association with this application for development and attach a completed Waiver request form. 		
	☐ SIA, Modification					
	☐ Sketch Plan, Major or Minor					
	☐ Sketch Plan, Revision ☐ Solid Waste Disposal Site/Facility					
	☐ Special District Special Use					
	☐ Major ☐ Minor, Admin or Renewal ☐ Subdivision Exception					
			PR	PROPERTY OWNER INFORMATION: Indicate the person(s) or		
	Vacation		org	organization(s) who own the property proposed for development.		
	☐ Plat Vacation with ROW		Att	Attach additional sheets if there are multiple property owners.		
	☐ Vacation of ROW Variances		2000			
	□ Major		N	Name (Individual or Organization):		
	☐ Minor (2 nd Dwelling or		7	Theresa Watson / Louis Sanford		
	Renewal)					
	☐ Tower, Renewal		N	Mailing Address:		
	☐ Vested Rights		2	3155 Paggerie Dr. C.S. CO 90006/D O.D. 4076 Distance		
	☐ Waiver or Deviation ☐ Waiver of Subdivision Regulations			3155 Pegasus Dr, C.S.,CO 80906/P.O.B. 1076,Bristow,OK		
	□ WSEO	Regulations	D	aytime Telephone:	Fax:	
	□ Other:					
This application form shall be accompanied by		E	Email or Alternative Contact Information:			
			· ·			
	all required support ma	aterials.				
			Ann			
	For PCD	Office Use:	Des	scription of the request: (sub	mit additional sheets if necessary):	
Date: File:		7 [1		
		Va	Vacate and Replat a portion of the 30' ingress/egress & utility			
D. J.D.		ea	easement across Lot 2 and a portion of Lot 3, Sanford Sub. Filing			
Rec'd By: Receipt #:		Nic	No. 3			

No. 3



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APPLICANT(s): Indicate person(s) submitting the application if different than the property owner(s) (attach additional sheets if

necessary)	property annual (a) (annual annual an
Name (Individual or Organization):	Commons Inc. (Inha M. Tarran)
Filliacie Land Surveying	Company Inc. (John W. Towner)
Mailing Address:	
121 County Road 5, Divide, CO 80814	
Daytime Telephone:	Fax:
719-687-7360	S Sale y
Email or Alternative Contact Information:	L
John@pinnaclesurve	ey.com
AUTHORIZED REPRESENTATIVE(s): Indicate the person(s) au	thorized to represent the property owner and/or applicants
(attach additional sheets if necessary).	
Name (Individual or Organization):	
Mailing Address:	
	9
Daytime Telephone:	Fax:
Email or Alternative Contact Information:	
AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVE(S):	
Owner or an authorized representative where the application is accommod to the control of the co	opment Application. An owner's signature may only be executed by the companied by a completed Authority to Represent/Owner's Affidavit
naming the person as the owner's agent	companied by a completed Authority to Represent/Owners Amidavit
Owner/Applicant Authorization:	
	nd all additional or supplemental documentation is true, factual and
complete. I am fully aware that any misrepresentation of any inform	nation 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. Lalso understand
that an incorrect submittal may delay review, and that any approva	al of this application is based on the representations made in the
application and may be revoked on any breach of representation o	r condition(s) of approval. I verify that I am submitting all of the
materials to allow a complete review and reasonable determination	nis project, and I acknowledge that failure to submit all of the necessary of conformance with the County's rules, regulations and ordinances
may result in my application not being accepted or may extend the le	ength of time needed to review the project. I hereby agree to abide by
all conditions of any approvals granted by El Paso County. I under	stand 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 co	ovenants. I agree that if a conflict should result from the request I am
any conflict. Thereby give normission to El Base County, and and	strictions, or restrictive covenants, it will be my responsibility to resolve
or without notice for the purposes of reviewing this development and	licable review agencies, to enter on the above described property with plication and enforcing the provisions of the LDC. I agree to at all times
maintain proper facilities and safe access for inspection of the prop	pileation and enforcing the provisions of the LDC. Fagree to at all times perty by El Paso County while this application is pending
	, , , , , , , , , , , , , , , , , , , ,
Owner (s) Signature:	Date: 11/29/17
Owner (s) Signature: ^ _	Date:
Applicant (s) Signature:	Date: 12-1-17



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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): Pinnacle Land Surveying Company Inc. (John W. Towner) Mailing Address: 121 County Road 5, Divide, CO 80814 Daytime Telephone: Fax: 719-687-7360 Email or Alternative Contact Information: John@pinnaclesurvey.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): Mailing Address: Daytime Telephone: Fax: Email or Alternative Contact Information: 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 knewledge, 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. Lagree that if a conflict should result from the request Lant submitting to El Paso County due to subdivision plat notes, deed restrictions, or restrictive covenants, it will be my responsibility to resolve any conflict. Thereby 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 preparty by El Paso County while this application is pending. Owner (s) Signature: Date: Owner (s) Signature: Dale: Applicant (s) Signature: Date: