



Planning and Community Development Department

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

Type C Application Form (1-2B)

Please check the applicable application type (Note: each request requires completion of a separate application form):

- ☐ Administrative Relief
- ☐ Certificate of Designation, Minor
- ☐ Site Development Plan, Major
- ☒ Site Development Plan, Minor
- ☐ CMRS Co-Location Agreement
- ☐ Condominium Plat
- ☐ Crystal Park Plat
- ☐ Early Grading Request associated with a Preliminary Plan
- ☐ Maintenance Agreement
- ☐ Minor PUD Amendment
- ☐ Resubmittal of Application(s) (>3 times)
- ☐ Road or Facility Acceptance, Preliminary
- ☐ Road or Facility Acceptance, Final
- ☐ Townhome Plat

Administrative Special Use (mark one)

- ☐ Extended Family Dwelling
- ☐ Temporary Mining or Batch Plant
- ☐ Oil and/or Gas Operations
- ☐ Rural Home Occupation
- ☐ Tower Renewal
- ☐ Other _____

Construction Drawing Review and Permits (mark one)

- ☐ Approved Construction Drawing Amendment
- ☐ Review of Construction Drawings
- ☐ Construction Permit
- ☐ Major Final Plat
- ☐ Minor Subdivision with Improvements
- ☐ Site Development Plan, Major
- ☐ Site Development Plan, Minor
- ☐ Early Grading or Grading
- ☐ ESQCP

Minor Vacations (mark one)

- ☐ Vacation of Interior Lot Line(s)
- ☐ Utility, Drainage, or Sidewalk Easements
- ☐ Sight Visibility
- ☐ View Corridor

☐ Other: _____

This application form shall be accompanied by all required support materials.

PROPERTY INFORMATION: Provide information about the proposed development. Attached additional sheets if necessary.

Property Address(es):

16965 Lindbergh Road, Monument, CO 80132

Tax ID/Parcel Numbers(s)

7121001009

Parcel size(s) in Acres:

7.332

Existing Land Use/Development:

vacant

Zoning District:

A-5

- ☐ 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.

PROPERTY OWNER INFORMATION: Indicate the person(s) or organization(s) who own the property proposed for development. Attached additional sheets if there are multiple property owners.

Name (Individual or Organization):

Daniel and Maria Crosby

Mailing Address:

PO Box 939 Monument, CO 80132

Daytime Telephone:

719-330-9001

Fax:

Email or Alternative Contact Information:

Dan@fuel.org

Description of the request: (attach additional sheets if necessary):

Construct a 5,986 SF church building and 29,524 sf parking lot on the west end of the site

For PCD Office Use:

Date:

File :

Rec'd By:

Receipt #:

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): Dan Crosby, Fuel Missions	
Mailing Address: PO Box 939 Monument, CO 80132	
Daytime Telephone: 719-330-9001	Fax:
Email or Alternative Contact Information: Dan@fuel.org	

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): Oliver E Watts Consulting Engineer, inc., attn Ollie or Erik	
Mailing Address: 614 Elkton Drive Colorado Springs, CO 80907	
Daytime Telephone: 719-593-0173	Fax:
Email or Alternative Contact Information: olliewatts@aol.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: [Signature]

Date: 10/26/20

Owner (s) Signature: [Signature]

Date: 10/26/20

Applicant (s) Signature: [Signature]

Date: 10-26-20

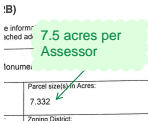
WATER SUPPLY INFORMATION SUMMARY

Section 30-28-133(d), C.R.S. requires that the applicant submit to the County, "Adequate evidence that a water supply that is sufficient in terms of quantity, quality and dependability will be available to ensure an adequate supply of water."

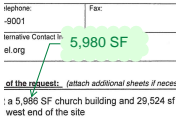
1. NAME OF DEVELOPMENT AS PROPOSED Fuel Missions Church			
2. LAND USE ACTION Development plan			
3. NAME OF EXISTING PARCEL AS RECORDED n/a			
SUBDIVISION	FILING	BLOCK	LOT
4. TOTAL ACREAGE 7.33	5. NUMBER OF LOTS PROPOSED PLAT MAP ENCLOSED <input type="checkbox"/> YES		
6. PARCEL HISTORY - Please attach copies of deeds, plats or other evidence or documentation. A. Was parcel recorded with county prior to June 1, 1972? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO B. Has the parcel ever been part of a division of land action since June 1, 1972? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, describe the previous action _____			
7. LOCATION OF PARCEL - Include a map delineating the project area and tie to a section corner. NW 1/4 OF SE 1/4 SECTION 21 TOWNSHIP 11 <input type="checkbox"/> N <input checked="" type="checkbox"/> S RANGE 67 <input type="checkbox"/> E <input checked="" type="checkbox"/> W PRINCIPAL MERIDIAN: <input checked="" type="checkbox"/> 6TH <input type="checkbox"/> N.M. <input type="checkbox"/> UTE <input type="checkbox"/> COSTILLA			
8. PLAT - Location of all wells on property must be plotted and permit numbers provided. Surveyors plat <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If not, scaled hand drawn sketch <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. ESTIMATED WATER REQUIREMENTS - Gallons per Day or Acre Feet per Year		10. WATER SUPPLY SOURCE	
HOUSEHOLD USE # _____ of units _____ GPD _____ AF COMMERCIAL USE # _____ of S.F. _____ GPD _____ AF IRRIGATION # _____ of acres _____ GPD _____ AF STOCK WATERING # _____ of head _____ GPD _____ AF OTHER _____ GPD _____ AF TOTAL _____ GPD _____ AF		<input checked="" type="checkbox"/> EXISTING WELLS <input type="checkbox"/> DEVELOPED SPRING WELL PERMIT NUMBERS 170331 <input type="checkbox"/> MUNICIPAL <input type="checkbox"/> ASSOCIATION <input type="checkbox"/> COMPANY <input type="checkbox"/> DISTRICT NAME _____ LETTER OF COMMITMENT FOR SERVICE <input type="checkbox"/> YES <input type="checkbox"/> NO	
		<input type="checkbox"/> NEW WELLS - PROPOSED AQUIFERS - (CHECK ONE) <input type="checkbox"/> ALLUVIAL <input type="checkbox"/> UPPER ARAPAHOE <input type="checkbox"/> UPPER DAWSON <input type="checkbox"/> LOWER ARAPAHOE <input type="checkbox"/> LOWER DAWSON <input type="checkbox"/> LARAMIE FOX HILLS <input type="checkbox"/> DENVER <input type="checkbox"/> DAKOTA <input type="checkbox"/> OTHER _____	
		WATER COURT DECREE CASE NO.'S _____ _____ _____	
11. ENGINEER'S WATER SUPPLY REPORT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, PLEASE FORWARD WITH THIS FORM. (This may be required before our review is completed.)			
12. TYPE OF SEWAGE DISPOSAL SYSTEM			
<input checked="" type="checkbox"/> SEPTIC TANK/LEACH FIELD		<input type="checkbox"/> CENTRAL SYSTEM - DISTRICT NAME _____	
<input type="checkbox"/> LAGOON		<input type="checkbox"/> VAULT - LOCATION SEWAGE HAULED TO _____	
<input type="checkbox"/> ENGINEERED SYSTEM (Attach a copy of engineering design)		<input type="checkbox"/> OTHER _____	


Application_V1.pdf Markup Summary

1 (2)



Subject: Callout
Page Label: 1
Author: Sophie Kiepe
Date: 1/21/2021 10:16:12 AM
Status:
Color: 
Layer:
Space: 7.5 acres per Assessor



Subject: Callout
Page Label: 1
Author: Sophie Kiepe
Date: 1/21/2021 10:16:23 AM
Status:
Color: 
Layer:
Space: 5,980 SF