

DSD File #:

Planning and Community Development Department 2880 International Circle, Colorado Springs, CO 80910 Phone 719.520.6300 | Fax 719.520.6695 | www.elpasoco.com

Type D Application Form (1-2C)

Please check the applie (Note: each request rec separate application fo	uires completion of a		Provide information to identify properties and at. Attached additional sheets if necessary.	
□ Appeal □ Approval of Location □ Board of Adjustment □ Certification of Designation □ Const. Drawings, Minor or Major □ Development Agreement □ Final Plat, Minor or Major □ Final Plat, Amendment		Property Address(es): The property is located at the northwest and southwest corners of the Highway 24 and Stapleton Road intersection.		
		Tax ID/Parcel Numbers(s) 42000-00-399	Parcel size(e) in Acros: 68.2 Area does not match legal description	
 □ Minor Subdivision □ Planned Unit Dev. Ame Major □ Preliminary Plan, Majo 	endment,	Existing Land Use/Developed Vacant	ment: Zoning District: Existing is PUD Proposed is CS (Commercial Service)	
X Rezoning Road Disclaimer 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 Vacation Plat Vacation with ROW Variances Major Minor (2 nd Dwelling or Renewal) Tower, Renewal Vested Rights Waiver or Deviation Waiver of Subdivision Regulations WSEO Other: This application form shall be accompanied by all required support materials.		 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. Attach additional sheets if there are multiple property owners. 		
		Name (Individual or Organ KO1515, LLC Mailing Address:	ization):	
		P.O. Box 1385 Colorado Springs, CO 809 Daytime Telephone: 303-906-8800	01 Fax:	
		Email or Alternative Contact Information: craig.dossey@vertexcos.com		
For PCD Office Use:		Description of the reque	st: (submit additional sheets if necessary):	
Date:	File:	A request for approval of a map amendment (rezoning) of all 68.2 acres from PUD (Planned Unit Development) to CS (Commercial Service).		
ec'd By:	Receipt #:			



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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

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Name (Individual or Organization): KO1515, LLC	
Mailing Address:	
P.O. Box 1385, Colorado Springs, CO 80921	
Daytime Telephone:	Fax:
303-906-8800	
Email or Alternative Contact Information: craig.dossey@vertexcos.com	
AUTHORIZED REPRESENTATIVE(S): Indicate the person(s) auth	orized to represent the property owner and/or applicants
attach additional sheets if necessary).	
Name (Individual or Organization):	
Craig Dossey, The O'Neil Group Company	
Mailing Address:	
P.O. Box 1385, Colorado Springs, CO 80901	
Daytime Telephone: 303-906-8800	Fax:
Email or Alternative Contact Information: craig.dossey@vertexcos.com	
Authorization for Owner's Applicant(s)/Representative(s): An owner signature is not required to process a Type A or B Development or an authorized representative where the application is Affidavit naming the person as the owner's agent	
familiarized myself with the rules, regulations and procedures with reincorrect submittal may delay review, and that any approval of this a may be revoked on any breach of representation or condition(s) of a of this application and as appropriate to this project, and I acknowled complete review and reasonable determination of conformance with application not being accepted or may extend the length of time nee any approvals granted by EI Paso County. I understand that such co obligation transferable by sale. I acknowledge that I understand the i subdivision plat notes, deed restrictions, or restrictive covenants. I ag Paso County due to subdivision plat notes, deed restrictions, or restrictions, or restrictions give permission to EI Paso County, and applicable review ag	ation on this application may be grounds for denial or revocation. I have espect to preparing and filing this application. I also understand that an application is based on the representations made in the application and approval. I verify that I am submitting all of the required materials as participated that failure to submit all of the necessary materials to allow a the County's rules, regulations and ordinances may result in my ded to review the project. I hereby agree to abide by all conditions of anditions shall apply to the subject property only and are a right or implications of use or development restrictions that are a result of gree that if a conflict should result from the request I am submitting to E ictive covenants, it will be my responsibility to resolve any conflict. I encies, to enter on the above described property with or without notice roing the provisions of the LDC. I agree to at all times m aintain proper bunty while this application is pending.
Owner (s) Signature:	Date:
Applicant (s) Signature:	Date: