

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 appli (Note: each request re separate application fo	quires completion of a			nformation to identify properties and ed additional sheets if necessary.		
		Pro	operty Address(es):			
☐ Appeal			sporty riddross(es).			
☐ Approval of Location						
☐ Board of Adjustment						
☐ Certification of Designation		Ta	x ID/Parcel Numbers(s)	Parcel size(s) in Acres:		
☐ Const. Drawings, Mino			• •			
☐ Development Agreement				29.04 AC		
☐ Final Plat, Minor or Major ☐ Final Plat, Amendment						
☐ Minor Subdivision	L	Ex	isting Land Use/Development:	Zoning District:		
☐ Planned Unit Dev. Ame	endment,					
Major □ Preliminary Plan, Majo	r or Minor					
□ Rezoning						
☐ Road Disclaimer			☐ Check this box if Administrative Relief is being requested in			
☐ SIA, Modification		"	association with this application and attach a completed			
☐ Sketch Plan, Major or Minor			Administrative Relief request form.			
☐ Sketch Plan, Revision			☐ Check this box if any Waivers are being requested in association			
☐ Solid Waste Disposal Site/Facility						
☐ Special District		with this application for development and attach a completed				
Special Use			Waiver request form.			
☐ Major	Dan awal					
☐ Minor, Admin or Renewal		PR	PROPERTY OWNER INFORMATION: Indicate the person(s) or			
☐ Subdivision Exception Vacation			organization(s) who own the property proposed for development.			
□ Plat Vacation with ROW			Attach additional sheets if there are multiple property owners.			
□ Vacation of ROW		,	aeri addineriai errecte il tirere ai	o manapio proporty o mioro:		
Variances			Name (Individual or Organization):			
☐ Major						
☐ Minor (2 nd Dwelling or Renewal)						
☐ Tower, Renewal		l N	Mailing Address:			
☐ Vested Rights			90 S CASCADE AVE STE 1500 COLORADO SPRINGS CO, 80903-1639			
☐ Waiver or Deviation			30 0 0/100/10E /(VE 01E 1000 0)	32010 1D 31 101100 00, 00000-1000		
☐ Waiver of Subdivision I☐ WSEO	Regulations		aytime Telephone:	Fax:		
□ Other:						
			Email or Alternative Contact Information:			
This application form shall be accompanied by						
all required support materials.						
For PCD Office Use:			scription of the request: (sur	bmit additional sheets if necessary):		
Date:	File:	1 1		HE CR CAD-O TO RM-30 CAD-O FOR		
				IG DEVELOPMENT. THE REMAINING		
Rec'd By: Receipt #: ACREAGE FROM THE PARENT PARCEL		RCEL TO REMAIN IN THE CR CAD-O				
•	1 '	\(\(\(\) \)	ONE.			



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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): THE EQUITY GROUP/E	PANNY MIENTKA				
Mailing Address: 90 S CASCADE AVE STE 1500 COLO	RADO SPRINGS CO, 80903-	1639			
Daytime Telephone: 719-475-7621	Fax:				
Email or Alternative Contact Information: danny@theequityg	group.net				
Authorized Representative(s): Indicate the person(s) a (attach additional sheets if necessary). Name (Individual or Organization): KIMLEY-HORN/JIM HO	···	ty owner and/or applicants			
Mailing Address: 2 N. NEVADA AVENUE, SUITE 300, COLORADO SPRINGS, CO 80903					
Daytime Telephone: 719-284-7280	Fax:				
Email or Alternative Contact Information: jim.houk@kimley-horn.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 a complete. I am fully aware that any misrepresentation of any infor have familiarized myself with the rules, regulations and procedure that an incorrect submittal may delay review, and that any approva application and may be revoked on any breach of representation required materials as part of this application and as appropriate to a materials to allow a complete review and reasonable determination may result in my application not being accepted or may extend the all conditions of any approvals granted by El Paso County. I unde are a right or obligation transferable by sale. I acknowledge that I a result of subdivision plat notes, deed restrictions, or restrictive c submitting to El Paso County due to subdivision plat notes, deed re any conflict. I hereby give permission to El Paso County, and apport without notice for the purposes of reviewing this development as maintain proper facilities and safe access for inspection of the pro-	mation on this application may be greated with respect to preparing and filing all of this application is based on the or condition(s) of approval. I verify this project, and I acknowledge that fan of conformance with the County's length of time needed to review the perstand that such conditions shall approve understand the implications of use covenants. I agree that if a conflict shestrictions, or restrictive covenants, it belicable review agencies to enter on polication and enforcing the provision	rounds for denial or revocation. In this application. It also understand representations made in the stat I am submitting all of the sailure to submit all of the necessary rules, regulations and ordinances project. I hereby agree to abide by only to the subject property only and or development restrictions that are sould result from the request I am at will be my responsibility to resolve the above described property with as of the LDC. I agree to at all times application is pending.			
Owner (s) Signature:	Date:	8-6-2020			
Owner (s) Signature:	Date:	0.7.0000			
Applicant (s) Signature	Date:	8-7-2020			