

Please check the applicable application type

(Note: each request requires completion of a

## **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)

separate application form):	the proposed developm
<ul> <li>Appeal</li> <li>Approval of Location</li> <li>Board of Adjustment</li> <li>Certification of Designation</li> <li>Const. Drawings, Minor or Major</li> <li>Development Agreement</li> <li>Final Plat, Minor or Major</li> <li>Final Plat, Amendment</li> <li>Minor Subdivision</li> <li>Planned Unit Dev. Amendment, Major</li> <li>Development Plan, Major and Minor Subdivision</li> </ul>	Property Address(es): 0 Goshawk Rd E Tax ID/Parcel Numbers(s) 5123000026 Existing Land Use/Develo Residential
<ul> <li>Preliminary Plan, Major or Minor</li> <li>Rezoning</li> <li>Road Disclaimer</li> <li>SIA, Modification</li> <li>Sketch Plan, Major or Minor</li> <li>Sketch Plan, Revision</li> <li>Solid Waste Disposal Site/Facility</li> <li>Special District</li> <li>Special Use</li> <li>Major</li> </ul>	<ul> <li>Check this box if A association with thi Administrative Relie</li> <li>Check this box if ar with this application Waiver request form</li> </ul>
<ul> <li>Minor, Admin or Renewal</li> <li>Subdivision Exception</li> <li>Vacation</li> <li>Plat Vacation with ROW</li> <li>Vacation of ROW</li> <li>Variances</li> <li>Major</li> <li>Minor (2<sup>nd</sup> Dwelling or Renewal)</li> </ul>	PROPERTY OWNER INFOR organization(s) who owr Attach additional sheets Name (Individual or Orga Chris Berisford
<ul> <li>Tower, Renewal</li> <li>Vested Rights</li> <li>Waiver or Deviation</li> <li>Waiver of Subdivision Regulations</li> </ul>	Mailing Address: 17240 Goshawk Rd Daytime Telephone:
WSEO     Other:	719-331-3414

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

For PCD Office Use:			
Date:	File :		
Rec'd By:	Receipt #:		
DSD File #:			

**PROPERTY INFORMATION:** Provide information to identify properties and ent. Attached additional sheets if necessary.

Property Address(es):			
0 Goshawk Rd E			
Tax ID/Parcel Numbers(s)	Parcel size(s) in Acres:		
5123000026	20		
Existing Land Use/Development:	Zoning District:		
Residential	RR-5		

- dministrative Relief is being requested in is application and attach a completed ef request form.
- ny Waivers are being requested in association n for development and attach a completed m.

**<u>RMATION</u>**: Indicate the person(s) or n the property proposed for development. if there are multiple property owners.

anization):

W

Email or Alternative Contact Information:

chris@berisfordgroup.com

## **Description of the request:** (submit additional sheets if necessary):

Fax:

Property Owner requ	iest subdividir	ng current 20	acre parcel into
four (4)_5 acre parce	ls		$\mathcal{J}$
The plat drawings			

late the parcers TYPE D APPLICATION FORM 1-2C is 19.88 acres. Page 1 or 2



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

**<u>APPLICANT(S)</u>**: Indicate person(s) submitting the application if different than the property owner(s) (attach additional sheets if necessary)

	Name (Individual or Organization): Chris Berisford					
	Mailing Address: 17240 Goshawk Rd W, Colorado Springs CO 80908					
	Daytime Telephone: Fax:					
$\mathcal{C}$	Email or Alternative Contact Information: chris@berisfordgroup.com					
Z	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): Amy Berisford					
pp	tex submitted the Dication. Please 00026					
on	Applete this form.     Fax:       719-360-7255     Fax:					
	Email or Alternative Contact Information: amy2275@gmail.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					
	<b>OWNER/APPLICANT AUTHORIZATION:</b> 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 any approval of this application is based on the representations made in the					

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 revelopment application and enforcing the provisions of the LDC. I agree to at all times maintain proper facilities and safe agrees for inspection of the property by El Paso County while this application is pending.

Owner (s) Signature:	Date:	9/13/2023
Owner (s) Signature:	Date:	
Applicant (s) Signature:	Date:	

TYPE D APPLICATION FORM 1-2C Page 2 or 2