

Please check the applicable application type

## 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)

(Note: each request requires completion of a separate application form):	the proposed development. Attach
	Property Address(es):
Approval of Location	7125 N Meridian Road, Peytor
Board of Adjustment	
□ Certification of Designation	Tax ID/Parcel Numbers(s)
Const, Drawings, Minor or Major	
Development Agreement	5312114004
Final Plat, Minor or Major	
Final Plat, Amendment	Existing Land Use/Development:
Minor Subdivision	
Planned Unit Dev. Amendment,	Vacant Land
Major	Vaoant Eana
Preliminary Plan, Major or Minor	
Road Disclaimer	Check this box if Administrat
□ SIA, Modification	association with this application
□ Sketch Plan, Major or Minor	Administrative Relief request
□ Sketch Plan, Revision	Check this box if any Waivers
□ Solid Waste Disposal Site/Facility	with this application for develo
Special District Special Use	Waiver request form.
	Walter loquoer lonn.
Minor, Admin or Renewal	
	PROPERTY OWNER INFORMATION: In
Vacation	organization(s) who own the prope
□ Plat Vacation with ROW	Attach additional sheets if there are
□ Vacation of ROW	
Variances	Name (Individual or Organization):
□ Major	
☐ Minor (2 <sup>nd</sup> Dwelling or	Park Place Enterprises, LLC
Renewal)	
Tower, Renewal	Mailing Address:
□ Vested Rights	15 Mirada Road, Colorado Sp
Waiver or Deviation	
Waiver of Subdivision Regulations	Daytime Telephone:
□ WSEO	
□ Other:	Empiler Alternative Contact Informa

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 ed additional sheets if necessary.

n, CO 80831

Tax ID/Parcel Numbers(s)	Parcel size(s) in Acres:
5312114004	2.13 AC
Existing Land Use/Development:	Zoning District:
Vacant Land	Existing: CR Proposed: CS

- tive Relief is being requested in on and attach a completed form.
- s are being requested in association opment and attach a completed

idicate the person(s) or erty proposed for development. e multiple property owners.

orings, CO 80906

Email or Alternative Contact Information:

wtbharris4@icloud.com

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

Fax:

A request for a map amendment (rezoning) of 2.13 AC from CR (Commercial Regional) to CS (Commercial Service).



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

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

Name (Individual or Organization): CAP Storage Falcon LLC				
Mailing Address: P.O. Box 10588, Greenville, SC 29603				
Daytime Telephone: 678-682-5560	Fax:			
Email or Alternative Contact Information:				

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):				
Galloway & Company, Inc				
Mailing Address:				
5500 Greenwood Plaza Blvd., Suite 200, Greenwood Village, CO 80111				
Daytime Telephone:	Fax:			
303-770-8884				
Email or Alternative Contact Information:				
brianhoran@gallowayus.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. 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	
Owner (s) Signature:	
Applicant (s) Signature:	

Date:  $\underline{12/18/25}$ 

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