

**EROSION AND STORMWATER QUALITY CONTROL PERMIT (ESQCP)
EL PASO COUNTY APPLICATION AND PERMIT**
County File No.: PPR-21-038

ESQCP 2331

APPLICANT INFORMATION

PERMIT NUMBER

Owner Information	
Property Owner	Ryan and Erin Schneider
Applicant Name (Permit Holder)	Ryan Schneider
Company/Agency	n/a
Position of Applicant	owner
Address (physical address, not PO Box)	2610 Fairmount Street
City	Colorado Springs
State	CO
Zip Code	80909
Mailing address, if different from above	
Telephone	719-632-3384
FAX number	
Email Address	ryschneider@gmail.com
Cellular Phone number	
Contractor/Operator Information	
Name (person of responsibility)	XXXXXXXXXX Colin Alexander
Company	The Alexander Bldg. Co. Inc.
Address (physical address, not PO Box)	3380 Capital Dr. Colo. Spgs., CO 80939
City	
State	
Zip Code	
Mailing address, if different from above	
Telephone	719-499-3641
FAX number	719-573-8755
Email Address	Colin@Alexander.net
Cellular Phone number	719-499-3641
Erosion Control Supervisor (ECS)*	XXXXXXXXXX
ECS Phone number*	XXXXXXXXXX
ECS Cellular Phone number*	

*Required for all applicants. May be provided at later date pending securing a contract when applicable.