



TOWN OF MONUMENT  
645 BEACON LITE ROAD  
MONUMENT, CO 80132

PLANNING DEPARTMENT  
Phone: 719-481-2954  
Email: [planning@tomgov.org](mailto:planning@tomgov.org)  
[www.townofmonument.org](http://www.townofmonument.org)

## DEVELOPMENT REVIEW APPLICATION

Project Number: \_\_\_\_\_

### PROJECT INFORMATION

Project Name: ACADEMY MARTIAL ARTS  
 Project Description: CONSTRUCTION OF A NEW 9,000 SF RETAIL/MARTIAL ARTS SCHOOL  
 Property Address/General Location: 980-992 GOLD CANYON ROAD  
 Total Land Area (acres): 1.32 ACRES Parcel #: 71133-01-080  
71133-01-065

### APPLICANT INFORMATION

Name: HAMMERS CONSTRUCTION  
 Person to Contact: LISA PETERSON  
 Mailing Address: HILL WOOLSEY HEIGHTS  
 Phone: 719-570-1599 Email: L.PETERSON@HAMMERSCONSTRUCTION.COM

### PROPERTY OWNER INFORMATION

Name: TOM AND CHRISTA LYNN / AMA 2.0, LLC  
 Person to Contact: CHRISTA LYNN  
 Mailing Address: 19350 BEACON LITE RD. MONUMENT, CO 80132  
 Phone: 786-218-0019 Email: CHRISTA.P.LYNN@GMAIL.COM

PRIMARY POINT OF CONTACT FOR THIS PROJECT: \_\_\_\_\_

### PLANNING DEPARTMENT DEVELOPMENT REVIEW FEES

APPLICATION TYPE	APPLICATION FEE
<input type="checkbox"/> Annexation	\$2,000 (10 acres or less) \$3,500 (over 10 acres)
<input type="checkbox"/> Rezoning	\$1,000
<input type="checkbox"/> Site Plan	\$3,500 (5 acres or less) \$5,000 (over 5 acres)
<b>PLANNED UNIT DEVELOPMENT (PUD)</b>	
<input type="checkbox"/> Preliminary PUD*	\$3,500 (5 acres or less) \$5,000 (over 5 acres)
<input checked="" type="checkbox"/> Final PUD	<del>\$3,000</del> <u>3,500</u>
<input checked="" type="checkbox"/> PUD Major Amendment	\$2,000
<input type="checkbox"/> PUD Minor Amendment	\$1,000

SUBDIVISION	
<input type="checkbox"/> Sketch Plan	\$1,000
<input type="checkbox"/> Preliminary Plat*	\$3,000
<input checked="" type="checkbox"/> Final Plat	\$1,500
<input type="checkbox"/> Minor Plat or Replat	\$1,500
<input type="checkbox"/> Plat Amendment	\$1,000
<input type="checkbox"/> Plat, Right-Of-Way or Easement Vacation	\$1,000
OTHER	
<input type="checkbox"/> CMRS Facility	\$500 Building or Structure Mounted*** \$500 Freestanding*** \$500 Roof Mounted*** \$270 Small Cell or Microcell Facility***** \$270 Small Cell Network****
<p>***For non-recurring fees, including a single up-front application that includes up to five small cell facilities, with an additional \$100 for each small cell facility beyond five, or \$1,000 for non-recurring fees for a new pole (i.e., not a collocation) intended to support one or more small cell facilities.</p> <p>****Per small cell facility per year for all recurring fees, including any right of way access fee or fee for attachment to Town-owned structures in the right of way.</p>	
<input type="checkbox"/> Zoning Variance – Non-Residential	\$1,000
<input type="checkbox"/> Zoning Variance – Residential	\$500
<input type="checkbox"/> Conditional Use	\$500**
<input type="checkbox"/> Additional Review Fee (after two reviews)	\$200: plus \$50 per hour (\$1000 maximum fee) per review
<input type="checkbox"/> Additional Charges	\$50 per hour for additional research; at staff discretion
<input type="checkbox"/> Construction Document (CDs) Review	\$500
<p>NOTES:</p> <p>* Preliminary/Final concurrent review shall be charged as preliminary.</p> <p>** There may be an additional \$3,000 application fee charged for requests with infrastructure issues; at Planning Staff discretion.</p>	

### CERTIFICATION

I certify the information and exhibits submitted are true and correct to the best of my knowledge and that in filling out this application, I am acting with the knowledge, consent, and authority of the owners of the real property, without whose consent and authority the requested action could not lawfully be accomplished. Pursuant to said authority, I hereby permit Town officials to enter upon the property for the purpose of inspection, and if necessary, for evaluation of the proposal. I understand that as the applicant designated on this application, I am liable for all fees and costs associated with the Town's review of this project. These may include, but are not limited to engineering and consultant fees, public notice costs, recordation fees, and any other fees paid by the Town in connection with or related to the review of this application. Payment of the above fees shall not relieve the payment of any other fees imposed by the Town.

Applicant: LISA PETERSON  
Name (printed)

Date: 8/26/22

By:   
Signature

As owner of the aforementioned property, I hereby consent to the submission of this application and authorize the applicant to act on my behalf with regard to this application.

Owner: Tom and Christa Lynn  
Name (printed)

Date: 8/1/22

By:   
Signature

**TO BE COMPLETED BY PLANNING STAFF ONLY**

Date Application Received: \_\_\_\_\_ Date Application Complete: \_\_\_\_\_

Date of Pre-Application Meeting: \_\_\_\_\_

Current Zoning of Subject Property: \_\_\_\_\_ Comprehensive Plan Designation: \_\_\_\_\_

Total Fees Paid: \_\_\_\_\_ Check # \_\_\_\_\_ Act# \_\_\_\_\_