



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 necessary).

Name (Individual or Organization):	
Mailing Address:	
Daytime Telephone:	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):	
Mailing Address:	
Daytime Telephone:	Email or Alternative Contact Information:

AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVE(S):

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. I 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: _____

Date: August 12, 2026

Owner (s) Signature: M. Arlan

Date: August 12, 2026

Applicant (s) Signature: _____

Date: _____

Property Information - Legal Description - The Shire at Old Ranch

A PARCEL OF LAND LOCATED IN THE SW1/4 OF THE SW1/4 OF SEC. 23 T. 12 S., R. 66 W.
OF THE 6TH P.M., EL PASO COUNTY, COLORADO

Address	Zoning	Legal Description	Parcel Number	Reception Number
3820 Old Ranch Rd.	RR-5	W 315 FT OF S2S2SW4 EX RDS SEC 23-12-66	6223000061	216003121
3890 Old Ranch Rd.	RR-5	E 385 FT OF W 715 FT OF S2S2SW4 EX S 30 FT SEC 23-12-66 19	6223000060	216003167
10655 Howells Rd.	RR-5	TRACT IN SW4SW4 SEC 23-12-66 AS FOLS, BEG ON W LN OF SD SW4 AT PT 660 FT N FROM SW COR THEREOF, TH N ON W LN 322.5 FT, E AT R/A 715 FT, S AT R/A 322.5 FT, TH W 715 FT TO POB EX W 30 FT	6223000059	216003151
10755 Howells Rd.	RR-5	TRACT IN SW4SW4 SEC 23-12-66 AS FOLS, BEG ON W LN OF SD SW4 AT PT 982.5 FT N FROM SW COR THEREOF, TH N ON W LN 322.5 FT, E AT R/A 715 FT, S AT R/A 322.5 FT, TH W 715 FT TO POB EX W 30 FT	6223000058	213027769

Authorized Representatives

Name	Mailing Address	Telephone	Email Address
Mark Phelan Primary Contact	4955 Austin Bluffs Parkway Colorado Springs, CO 80918	719.243.2678	mark@phelangardens.com
Monica Phelan	10755 Howells Road Colorado Springs, CO 80908	719.243.2677	monica@phelangardens.com
Scott Harvey	10 Boulder Crescent St., #302-B Colorado Springs, CO 80903	719.930.5146	sharvey@artofengineering.com
Bill Fisher	P.O. Box 1395 Palmer Lake, CO 80133	719.660.4356	bill@fisharch.com
Curtis Rowe	2 North Nevada Ave., Suite 300 Colorado Springs, CO 80903	720.480.9036	Curtis.Rowe@kimley-horn.com
Sean Donohue	6745 Rangewood Dr., Ste 210 Colorado Springs, CO 80918-7105	719.355.5290	sean@peregrinefire.com
Megan Brown	6060 Wheatgrass Dr Colorado Springs, CO 80923	540.539.5025	megan@phelangardens.com