

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)

| Please check the applicable application type (Note: each request requires completion of a separate application form): | | PROPERTY INFORMATION: Provide information to identify properties and the proposed development. Attached additional sheets if necessary. | | |
|---|--------------|--|-------------------|--|
| | | Property Address(es): | | |
| □ Appeal □ Approval of Location □ Board of Adjustment | | Vollmer Road | | |
| ☐ Certification of Designation | | Tax ID/Parcel Numbers(s) Parcel size(s) in Acres: | | |
| ☐ Const. Drawings, Minor or Major | | E00000004 | | |
| ☐ Development Agreement | | 1 100.03 AC | | |
| ☐ Final Plat, Minor or Major | | 5228000025 | | |
| ☐ Final Plat, Amendment ☐ Minor Subdivision | | Existing Land Use/Development: Zoning District: | | |
| ☐ Planned Unit Dev. Amendment, | | Versel/OF Presidential | | |
| Major | | Vacant/SF Residential RR-5 | | |
| Preliminary Plan, Major or Mino | this applic | on form | | |
| P □ Rezoning \ | tilis applic | | | |
| DRoad Disclationer | snoula jus | ust be for the this box if Administrative Relief is being requested in | | |
| ☐ SIA, Modification TeZone for the | | nis filesociation with this application and attach a completed | | |
| ☐ Sketch Plan, Major or Minor | | Administrative Relief request form. | | |
| ☐ Sketch Plan, Revision | | ☐ Check this box if any Waivers are being requested in association | | |
| ☐ Solid Waste Disposal Site/Facil | ity | with this application for development and attach a completed | | |
| ☐ Special District | | Waiver request form. | | |
| Special Use □ Major | | Traitor roquost offin | | |
| ☐ Minor, Admin or Renewal | | The same of the sa | | |
| □ Subdivision Exception | | PROPERTY OWNER INFORMATION: Indicate the person(s) or | | |
| Vacation | | organization(s) who own the property proposed for development. | | |
| ☐ Plat Vacation with ROW | | Attach additional sheets if there are multiple property owners. | | |
| ☐ Vacation of ROW | | | | |
| Variances | | Name (Individual or Organization): | | |
| □ Major | | Classic SRJ Land, LLC | | |
| ☐ Minor (2 nd Dwelling or Renewal) | | Classic Shu Lanu, LLC | | |
| □ Tower, Renewal | | Mailing Address: | | |
| □ Vested Rights | | 2138 Flying Horse Club Drive | | |
| □ Waiver or Deviation | | 2136 Flying Horse Glub Drive | | |
| ☐ Waiver of Subdivision Regulations | | Daytime Telephone: Fax: | | |
| □ WSEO | | | | |
| | | 719-592-9333 | | |
| □ Other: | | Email or Alternative Contact Information: | | |
| This application form shall be assembled by | | | | |
| This application form shall be accompanied by all required support materials. | | | | |
| an required support materials. | | | | |
| For PCD Office Use: | | Description of the request: (submit additional sheets if necessary): | | |
| Date: File : | | Rezone the property from RR-5 to RS-6000, RR-0.5, and | | |
| | | RR-2.5. A preliminary Plan for 217 detached single family lots, | | |
| Rec'd By: Receipt #: | | community park, open space and detention facilities. | | |
| Troodpt // | | Sommanity parts, open opage and determine identities. | | |
| | | rezone from RR5 to RS6000 for | | |
| DSD File #: | | | | |
| | | XXX acres. (noted a concurrent | | |
| | | application for other rezones and | | |
| | | relim) | | |
| | | Tur- B. Annual | TION FORM 1-2C | |
| | | I Abbillo | LILIN ELIXM 1-/(, | |

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

| necessary) | | | | |
|--|--|--|--|--|
| Name (Individual or Organization): | | | | |
| Classic SRJ Land, LLC | | | | |
| Mailing Address: | | | | |
| 2138 Flying Horse Club Drive | | | | |
| Daytime Telephone: | Fax: | | | |
| 719-592-9333 | | | | |
| Email or Alternative Contact Information: | | | | |
| | | | | |
| | therized to represent the property owner and/or applicants | | | |
| <u>AUTHORIZED REPRESENTATIVE(S):</u> Indicate the person(s) au (attach additional sheets if necessary). | thonzed to represent the property owner and/or applicants | | | |
| Name (Individual or Organization): | | | | |
| N.E.S Inc. | | | | |
| Mailing Address: | | | | |
| 619 N Cascade Ave., Suite 200 | | | | |
| Daytime Telephone: | Fax: | | | |
| 719-471-0073 | | | | |
| Email or Alternative Contact Information: | | | | |
| bperkins@nescolorado.com / 719-433-2805 | | | | |
| Sperking encodolorade.com 7 10 400 2000 | | | | |
| 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 | | | | |
| Ne set v | | | | |
| OWNER/APPLICANT AUTHORIZATION: To the best of my knowledge, the information on this application as | nd all additional or supplemental documentation is true, factual and | | | |
| complete. Lam fully aware that any misrepresentation of any inform | nation on this application may be grounds for denial or revocation. I | | | |
| have familiarized myself with the rules, regulations and procedures | s with respect to preparing and filing this application. I also understan | | | |
| 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 EI Paso County due to subdivision plat notes, deed restrictions, or restrictive covenants, it will be my responsibility to resolve | | | | |
| submitting to El Paso County due to subdivision plat notes, deed re | strictions, or restrictive covenants, it will be my responsibility to resolve | | | |
| any conflict. I nereby give permission to El Paso County, and app | licable review agencies, to enter on the above described property wit plication and enforcing the provisions of the LDC. I agree to at all time | | | |
| maintain proper facilities and safe access/for inspection of the pro | perty by El Paso County while this application is pending. | | | |
| | | | | |
| Owner (s) Signature: | Date: <u>12/20/2023</u> | | | |
| Owner (s) Signature: | Date: | | | |
| Owner (3) digitatore. | | | | |
| Applicant (s) Signature: | Date: 12/20/2023 | | | |