

Planning and Community Development Department 2880 International Circle, Colorado Springs, CO 80910

Phone 719.520.6300 | Fax 719.520.8695 | www.elpasoco.com

Type C Application Form (1-2B)

(Note: each request requires completion of a		PROPERTY INFORMATION: Provide information to identify properties and the proposed development. Attached additional sheets if necessary.		
separate application form): Administrative Relief Certificate of Designation, Minor Site Development Plan, Major Site Development Plan, Minor		Property Address(es): 10255 Lambert Road Peyton, CO 80831		
☐ CMRS Co-Location a ☐ Condominium Plat	Agreement	Tax ID/Parcel Numbers(s)	Parcel size(s) in Acres:	
☐ Crystal Park Plat☐ Early Grading Reque	est associated with a	4200000335	70 ac.	
Prellminary Plan ☐ Maintenance Agreer		Existing Land Use/Development:	Zoning District:	
☐ Minor PUD Amendm	nent	Political Subdivision	PUD-Planned Unit Developmen	
 □ Resubmittal of Application □ Road or Facility Acceptable 				
☐ Road or Facility Acc	eptance, Final	☐ Check this box if Administrati	<u> </u>	
Administrative Special	Use (mark one)	association with this application Administrative Relief request for	•	
☐ Extended Family Dwelling		☐ Check this box if any Walvers are being requested in association		
☐ Ternporary Mining or Batch Plant ☐ Oil and/or Gas Operations		with this application for development and attach a completed Waiver request form.		
☐ Rural Home Od ☐ Tower Renewa	•	PROPERTY OWNER INFORMATION:	ndicate the nerson(s) or	
Other		organization(s) who own the prop	erty proposed for development.	
Construction Drawing F	Review and Permits (mark one)	Attached additional sheets if there	e are multiple property owners.	
Amendment Review of Construction Drawings Construction Permit Major Final Plat Minor Subdivision with Improvements Site Development Plan, Major		Name (Individual or Organization):		
		Falcon School District No. 49 - Melissa Andrews		
		Mailing Address:		
		10850 E. Woodmen Road, Peyton, CO 80831		
☐ Site Developme	ent Plan, Minor	Daytime Telephone:	Fax:	
☐ Early Grading o	or Grading	(719) 494-8997	(719) 494-8900	
Minor Vacations (mark one)		Email or Alternative Contact Information;		
□ Vacation of Interior Lot Line(s) □ Utility, Drainage, or Sidewalk		mandrews@d49.org		
Easements □ Sight Visibility		<u> </u>		
☐ View Corridor	choose this	Description of the request: (a)	ttach additional sheets if necessary):	
Other:		Building addition anto aviat	ling High Cahool	
This application form shall be accompanied by all required support materials.		Building addition onto existing High School.		
Toquito opporting		Site was designed and cor		
For PCD Office Use:		this future expansion planned.		
Date:	File:	Therefore, site improveme	nts are minimal.	
Rec'd By:	Receipt #:			
DSD File #:		-	Type C Application Form 1-2B	



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Classic Consulting - Matt Larson Walling Address: 819 North Cascade Avenue, Colorado Springs, CO 80903 Daylime Telephone: (719) 785-0790 Fax: (719) 785-0799 Email or Alternative Contact Information: mlarson@classicconsulting.net 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): Falcon School District No. 49 - Meltissa Andrews Walling Address: 10850 E. Woodmen Road, Peyton, CO 80831 Daytime Telephone: (719) 494-8997 Email or Alternative Contact Information: mandrews@d49.org 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 interesting the person as the owner's agent 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 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 may be revoked on any treach of representation or condition(s) of approval. I verify that I am submitting all of the sequired materials as part of this application and as appropriate to this project, and lacknowledge that failure to submit all of the necess and a submit and the project of any approvale granted by El Peso County. I understand the implications of use or development restrictions that is application and age agrented by El Peso County. I understand the implications of use or development restrictions that is a submitting to give permission to El Peso County. I understand the implications of use or development restrictions that is a submitting to give permission to El Peso County. I understand the implications of use or de	necessary). Name (Individual or Organization):	
Fax: (719) 785-0799 Email or Alternative Contact Information: mlarson@classicconsulting.net 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): Falcon School District No. 49 - Melissa Andrews Mailing Address: 10850 E. Woodmen Road, Peyton, CO 80831 Daytime Telephone: (719) 494-8997 Fax: (719) 494-8900	Classic Consulting - Ma	att Larson
Email or Alternative Contact Information: mlarson@classicconsulting.net 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): Falcon School District No. 49 - Melissa Andrews Mailing Address: 10850 E. Woodmen Road, Peyton, CO 80831 Daytime Telephone: (719) 494-8997 Email or Alternative Contact Information: mandrews@d49.org 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. DWNER/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 understant and may be revoked on any breach of representation or condition(s) of approval. I verify that I am submitting all of the equired materials is apart of this application and reasonable determination of conformance with the Country's rules, regulations and ordinance are a right or obligation transferable by sale. I acknowledge that I understand that such conditions shall apply to the subject property only are a right or obligation transferable by sale. I acknowledge that I understand the implications of any approvals granted by El Paso County. I understand that such conditions shall apply to the subject property only are a right or obligation transferable by sale. I acknowledge that I understand the implications of any or offici. I hereby give permission to El Paso Co	Mailing Address: 619 North Cascade Avenue, Colorado	Springs, CO 80903
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Email or Alternative Contact Information: **mandrews@d49.org** **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 Affidavity and the person as the owner's agent Owner's 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. Not application and may be revoked on any breach of representation of this application is application. I also understate 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 necess materials to allow a complete review and reasonable determination of conformance with the County's rules, regulations and ordinance 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 all conditions of any approvals granted by El Paso County. I understand that such conditions shall apply to the subject property only a are a right or obligation transferable by sale. I acknowledge that I understand the implications of use or development restrictions that a result of subdivision plat notes, deed restrictions, or restrictive covenants. I agree that if a conflict should result from the request I assumitting to El Paso County due to subdivision plat notes, deed restrictions, or restrictive covenants, it will be my responsibility to reso any conflict. I hereby give permission t	Mailing Address: 10850 E. Woodmen Road, Peyton, CC	O 80831
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	Owner (s) Signature:	Date: