

## 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):		information to identify properties and hed additional sheets if necessary.	
Control of the Contro	Property Address(es):		
☐ Appeal ☑ Approval of Location ☐ Board of Adjustment	4610 Fencer Road, Colorado Springs,CO 80911		
☐ Certification of Designation☐ Const. Drawings, Minor or Major☐	Tax ID/Parcel Numbers(s)	Parcel size(s) in Acres:	
☐ Development Agreement ☐ Final Plat, Minor or Major	6512100012	7.7 Acres	
☐ Final Plat, Amendment ☐ Minor Subdivision	Existing Land Use/Development:	Zoning District:	
☐ Planned Unit Dev. Amendment,  Major	Park Renovation	RS-6000	
□ Preliminary Plan, Major or Minor □ Rezoning			
□ Road Disclaimer □ SIA, Modification □ Sketch Plan, Major or Minor	<ul> <li>Check this box if Administrative Relief is being requested in association with this application and attach a completed Administrative Relief request form.</li> </ul>		
□ Sketch Plan, Revision □ Solid Waste Disposal Site/Facility □ Special District Special Use □ Major	☐ Check this box if any Waive	<ul> <li>Check this box if any Waivers are being requested in association with this application for development and attach a completed</li> </ul>	
☐ Minor, Admin or Renewal ☐ Subdivision Exception Vacation	PROPERTY OWNER INFORMATION: Indicate the person(s) or organization(s) who own the property proposed for development.		
☐ Plat Vacation with ROW☐ Vacation of ROW	Attach additional sheets if there are multiple property owners.		
Variances  □ Major	Name (Individual or Organization):		
☐ Minor (2 <sup>nd</sup> Dwelling or Renewal)	Widefield School District 3		
☐ Tower, Renewal	Mailing Address:		
☐ Vested Rights ☐ Waiver or Deviation	705 Aspen Drive, Colorado Springs, CO 80911		
☐ Waiver of Subdivision Regulations ☐ WSEO	Daytime Telephone:	Fax:	
Other:	719-391-3515	719-392-3447	
to a second seco	Email or Alternative Contact Information:		
This application form shall be accompanied by all required support materials.	valdezb@wsd3.org		
For PCD Office Use:	Description of the request: (s	ubmit additional sheets if necessary):	
Date: File:			
Rec'd By: Receipt #:	Widefield School District 3 is	Widefield School District 3 is requesting approval for park location	
DSD File #:		<b></b>	



## 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): Widefield School District	3
Mailing Address: 705 Aspen Drive, Colorado Springs, CO	80911
Daytime Telephone: 719-391-3515	Fax: 719-392-3447
Email or Alternative Contact Information:	
AUTHORIZED REPRESENTATIVE(s): Indicate the person(s) at (attach additional sheets if necessary).	uthorized to represent the property owner and/or applicants
Name (Individual or Organization):  Ben Valdez	
Mailing Address: 705 Aspen Drive, Colorado Springs, CO	80911
Daytime Telephone: 719-391-3515	Fax: 719-392-3447
Email or Alternative Contact Information: valdezb@wsd3.org	
	opment Application. An owner's signature may only be executed by the companied by a completed Authority to Represent/Owner's Affidavit
complete. I am fully aware that any misrepresentation of any informative familiarized myself with the rules, regulations and procedure that an incorrect submittal may delay review, and that any approva application and may be revoked on any breach of representation or required materials as part of this application and as appropriate to to materials to allow a complete review and reasonable determination may result in my application not being accepted or may extend the all conditions of any approvals granted by El Paso County. I unde are a right or obligation transferable by sale. I acknowledge that I a result of subdivision plat notes, deed restrictions, or restrictive c submitting to El Paso County due to subdivision plat notes, deed reany conflict. I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County, and approved that I hereby give permission to El Paso County.	or condition(s) of approval. I verify that I am submitting all of the his project, and I acknowledge that failure to submit all of the necessary of conformance with the County's rules, regulations and ordinances length of time needed to review the project. I hereby agree to abide by estand that such conditions shall apply to the subject property only and understand the implications of use or development restrictions that are ovenants. I agree that if a conflict should result from the request I am estrictions, or restrictive covenants, it will be my responsibility to resolve plicable review agencies, to enter on the above described property with oplication and enforcing the provisions of the LDC. I agree to at all times
Owner (s) Signature:	Date:
Applicant (s) Signature: Den Ville	Date: