

Please check the applicable application type

Planning and Community Development Department

2880 International Circle, Colorado Springs, CO 80910
Phone 719.520.6300 | Fax 719.520.6695 | <u>www.elpasoco.com</u>

Application Form

PROPERTY INFORMATION: Provide information to identify properties

Administrative Determination Administrative Relief Approal of Location Administrative Relief Approal of Location Administrative Relief Approal of Location Appro	separate application form):	and the proposed development. Attach additional sheets if
Administrative Determination Administrative Relief Appeal Approval of Location 18675 \$1 Available 000	separate application form).	· ·
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Final Plat		• •
Maintenance Agreement	, , ,	
Merger by Contiguity Townhome Plat Planned Unit Development Preliminary Plan Preliminary Plan Organization(s) who own the property proposed for development. Attach additional sheets if there are multiple property owners. Road Disclaimer Road or Facility Acceptance Site Development Plan Sketch Plan Sheetin P	The state of the s	applicable):
Planned Unit Development		RS-20000
Preliminary Plan	☐ Townhome Plat	
□ Rezoning □ Rezoning □ Organization(s) who own the property proposed for development. □ Road Disclaimer □ Road or Facility Acceptance □ Site Development Plan □ Sketch Plan □ Solid Waste Disposal Site/Facility □ Special District □ Special Use □ Subdivision Exemption □ Subdivision Improvement Agreement □ Variance of Use □ WSEO □ Other: □ This application form shall be accompanied by all □ Table 1	☐ Planned Unit Development	PROPERTY OWNER INFORMATIONS Indicate the person(s) or
Road Disclaimer	□ Preliminary Plan	
Road or Facility Acceptance Site Development Plan Sketch Plan Solid Waste Disposal Site/Facility Special District Special Use Subdivision Exemption Subdivision Improvement Agreement Variance of Use WSEO Other: This application form shall be accompanied by all		organization(s) who own the property proposed for development.
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Daytime Telephone: Other: This application form shall be accompanied by all		110,010,110,7 00 00127
□ WSEO □ Other: This application form shall be accompanied by all Email or Alternative Contact Information:		MUNDOMEN, CO 8015Z
□ Other: 760 - 963 - 5696 Email or Alternative Contact Information:	The state of the s	
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	required support materials.	1 3 0843 (00 MIN, COP)

DESCRIPTION OF THE REQUEST: (attach additional sheets if necessary):

REQUESTING WARIANCE IN COT SIZE STETBACKS TO ASIS AN ACCESSEY LIVING QUARTURE

Remove to avoid confusion. Your lot size is in compliance. The setback is what the variance request is for.



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

necessary).		
Name (Individual or Organization):		
TIM AND JANA JORDAN		
Mailing Address:		
1867S STANDREWS DR, MONTMENT, CO 80132		
Daytime Telephone: Email or Alternative Contact Information:		
760-963-5696 TJØ843@MSN.COM		
7 308 17 2 336 201 7		
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):		
Name (individual or Organization).		
Mailing Address:		
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 Lam submitting all of the required materials as each of this analysis and the required materials as a set of this analysis as a set of the second of the secon		
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 pates doed rottis language and 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 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.		
[1.3/6/1 /2/1 E/12 /2024		
Owner (s) Signature:		
Owner (s) Signature: Date: 3/22 /2029		
Owner (s) Signature: Date: Date:		
Applicant (s) Signature: Date:		