

Planning and Community Development Department

2880 International Circle, Colorado Springs, CO 80910 Phone 719.520.6300 | Fax 719.520.6695 |

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

necessary)
Name (Individual or Organization)
Trinity Building Contractor, UC Timothy S. Belcher (TJ) Mailing Address:
P.D. Box 7061 Woodland Park, Colorado 80863
Daytime Telephone: Fax:
(719)246-5842 NA Email of Alternative Contact Information:
trinity buildings entractor @gmail.com
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):
Timothy J. Belcher (TS) co Trinity Building Contractor
Mailing Address:
P.O. Box 7061 Woodland Park, Colorado 80863 Daytime Telephone: Fax:
719-2455842
Email or Alternative Contact Information:
trinity building contractor @gmail: com
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
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 filling 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 EI Paso County while this application is pending.
Owner (s) Signature: Date: 6/19/21
Owner (s) Signature: Juliana (Noto-Langua) Date: 10/19/2021
Applicant (s) Signature: \ Linusthy L. Bollo Los Date: 6/21/2021



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Type D Application Form (1-2C)

PROPERTY INFORMATION: Provide information to identify properties and

the proposed development. Attached additional sheets if necessary.

Please check the applicable application type (Note: each request requires completion of a separate application form):

Rec'd By:

DSD File #:

	•	Property Address(es):		
☐ Appeal		M 39		
☐ Approval of Location		1065 Rock Creek Canyon Rd Tax ID/Parcel Numbers(s)	Ca 80976	
☐ Board of Adjustment		1065 Rock Creek Canyon Rd	, (010 SPF5, CO OC 120	
☐ Certification of Designation		Tax ID/Parcel Numbers(s)	Parcel size(s) In Acres:	
Const. Drawings, Minor or Major				
☐ Development Agreement			1	
☐ Final Plat, Minor or Major		7525000100 larable	·	
☐ Final Plat, Amendment		Existing Land Use/Development:	Zoning District:	
☐ Minor Subdivision		Caloung Edina Occident	Zoning District: F5	
☐ Planned Unit Dev. Amendment, Major			Select zoning district	
☐ Preliminary Plan, Major or Minor				
☐ Rezoning		- or the track A facilitation that is being requested in		
☐ Road Disclaimer		 Check this box if Administrative Relief is being requested in association with this application and attach a completed Administrative Relief request form. 		
☐ SIA, Modification				
☐ Sketch Plan, Major or Minor				
☐ Sketch Plan, Revision		☐ Check this box if any Waivers are being requested in association		
☐ Solid Waste Disposal Site/Facility		with this application for development and attach a completed		
☐ Special District		Waiver request form.		
Special Use		Wanti requote form.		
☐ Major				
☐ Minor, Admin or Re	enewai	PROPERTY OWNER INFORMATION: Indicate the person(s) or		
☐ Subdivision Exception Vacation		organization(s) who own the property proposed for development.		
	POW.	Attach additional sheets if there are multiple property owners.		
☐ Plat Vacation with ROW		Attach additional shoots if aford are	maniple property	
☐ Vacation of ROW Variances		Name (Individual or Organization):		
□ Major		, m	Name (Individual of Organization).	
Minor (2 nd Dwelling or		Javitar & Dreama Ramirez		
Renewal)				
☐ Tower, Renewal		Mailing Address:		
☐ Vested Rights		1000 0 400 00 00 00 C/CVC CE POQT		
☐ Waiver or Deviation		1065 Rock Charle Couyor Rd, Colo 495, 89786 Davime Telephone: Fax:		
☐ Waiver of Subdivision Regulations		Daytime Telephone: Fax:		
□WSEO			0.920,0	
		719-576-7218		
Other:			law	
		Email or Alternative Contact Informat	ion.	
This application form shall be accompanied by all required support materials.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C 1:	
		XAVRAM QGMail	Corg	
For PCD Office Use:		Description of the request: (sub	omit additional sheets if necessary):	
Pate:	File:	Durid Attached 2/120	Gasa40	
	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	/ / / /	
Rec'd By:	Receipt #:	Que managline to c	Garage ome 15' into Settock	
CC a Dy.	- Cossipe III	THE TEGETSHIP TO	IO	
OSD File #:		Variance Useage		
		I I	T	