



TOWN OF MONUMENT  
645 BEACON LITE ROAD  
MONUMENT, CO 80132

PLANNING DEPARTMENT  
Phone: 719-481-2954  
Email: [planning@tomgov.org](mailto:planning@tomgov.org)  
[www.townofmonument.org](http://www.townofmonument.org)

## DEVELOPMENT REVIEW APPLICATION

Project Number: \_\_\_\_\_

### PROJECT INFORMATION

Project Name: BEACON LITE OFFICE/WAREHOUSE DEVELOPMENT  
 Project Description: OFFICE/WAREHOUSE BUILDING in multiple Bldgs.  
 Property Address/General Location: 19375 Beacon Lite Rd, Monument Co 80132  
 Total Land Area (acres): 5.02 AC Parcel #: 711001002

### APPLICANT INFORMATION

Name: RMG ARCHITECTS  
 Person to Contact: KENT MOORE  
 Mailing Address: 19375 BEACON LITE RD  
 Phone: 719-203-3321 Email: kmoore@rmg-engineers.com

### PROPERTY OWNER INFORMATION

Name: BEACON LITE LLC  
 Person to Contact: JOHN CLARKE  
 Mailing Address: 2910 AUSTIN Bluffs Pkwy, Colo Spgs, Co 80918  
 Phone: 719-520-0600 Email: jclarke@rmg-engineers.com

PRIMARY POINT OF CONTACT FOR THIS PROJECT: Keith Moore

### PLANNING DEPARTMENT DEVELOPMENT REVIEW FEES

APPLICATION TYPE	APPLICATION FEE
<input type="checkbox"/> Annexation	\$2,000 (10 acres or less) \$3,500 (over 10 acres)
<input type="checkbox"/> Rezoning	\$1,000
<input type="checkbox"/> Site Plan	\$3,500 (5 acres or less) \$5,000 (over 5 acres)
<b>PLANNED UNIT DEVELOPMENT (PUD)</b>	
<input type="checkbox"/> Preliminary PUD*	\$3,500 (5 acres or less) \$5,000 (over 5 acres)
<input type="checkbox"/> Final PUD	\$3,000
<input type="checkbox"/> PUD Major Amendment	\$2,000
<input type="checkbox"/> PUD Minor Amendment	\$1,000

SUBDIVISION	
<input type="checkbox"/> Sketch Plan	\$1,000
<input type="checkbox"/> Preliminary Plat*	\$3,000
<input type="checkbox"/> Final Plat	\$1,500
<input type="checkbox"/> Minor Plat or Replat	\$1,500
<input type="checkbox"/> Plat Amendment	\$1,000
<input type="checkbox"/> Plat, Right-Of-Way or Easement Vacation	\$1,000
OTHER	
<input type="checkbox"/> CMRS Facility	\$500 Building or Structure Mounted*** \$500 Freestanding*** \$500 Roof Mounted*** \$270 Small Cell or Microcell Facility**** \$270 Small Cell Network****
***For non-recurring fees, including a single up-front application that includes up to five small cell facilities, with an additional \$100 for each small cell facility beyond five, or \$1,000 for non-recurring fees for a new pole (i.e., not a collocation) intended to support one or more small cell facilities.	
****Per small cell facility per year for all recurring fees, including any right of way access fee or fee for attachment to Town-owned structures in the right of way.	
<input type="checkbox"/> Zoning Variance – Non-Residential	\$1,000
<input type="checkbox"/> Zoning Variance – Residential	\$500
<input type="checkbox"/> Conditional Use	\$500**
<input type="checkbox"/> Additional Review Fee (after two reviews)	\$200: plus \$50 per hour (\$1000 maximum fee) per review
<input type="checkbox"/> Additional Charges	\$50 per hour for additional research; at staff discretion
<input type="checkbox"/> Construction Document (CDs) Review	\$500
NOTES: * Preliminary/Final concurrent review shall be charged as preliminary. ** There may be an additional \$3,000 application fee charged for requests with infrastructure issues; at Planning Staff discretion.	

### CERTIFICATION

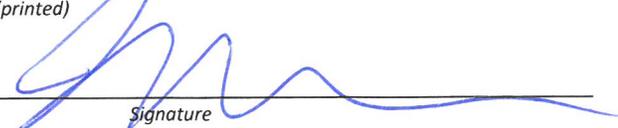
I certify the information and exhibits submitted are true and correct to the best of my knowledge and that in filling out this application, I am acting with the knowledge, consent, and authority of the owners of the real property, without whose consent and authority the requested action could not lawfully be accomplished. Pursuant to said authority, I hereby permit Town officials to enter upon the property for the purpose of inspection, and if necessary, for evaluation of the proposal. I understand that as the applicant designated on this application, I am liable for all fees and costs associated with the Town's review of this project. These may include, but are not limited to engineering and consultant fees, public notice costs, recordation fees, and any other fees paid by the Town in connection with or related to the review of this application. Payment of the above fees shall not relieve the payment of any other fees imposed by the Town.

Applicant: Keith Moore Date: 6/2/22  
Name (printed)

By:  \_\_\_\_\_  
Signature

As owner of the aforementioned property, I hereby consent to the submission of this application and authorize the applicant to act on my behalf with regard to this application.

Owner: JOHN P. CLARKE Date: 5/19/22  
Name (printed)

By:  \_\_\_\_\_  
Signature

**TO BE COMPLETED BY PLANNING STAFF ONLY**

Date Application Received: \_\_\_\_\_

Date Application Complete: \_\_\_\_\_

Date of Pre-Application Meeting: \_\_\_\_\_

Current Zoning of Subject Property: \_\_\_\_\_

Comprehensive Plan Designation: \_\_\_\_\_

Total Fees Paid: \_\_\_\_\_

Check # \_\_\_\_\_

Act# \_\_\_\_\_