

Applicant (s) Signature:

## 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): LGA Studios Mailing Address: 201 E. Las Animas St.., Suite 113, Colorado Springs, CO 80903 Daytime Telephone: Fax: 719-635-0880 x101 **Email or Alternative Contact Information:** 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): **LGA Studios** Mailing Address: 201 E. Las Animas St., Suite 113, Colorado Springs, CO 80903 Daytime Telephone: 719-635-0880 x101 **Email or Alternative Contact Information:** joniz@lgastudios.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 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 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 El Paso County while this application is pending. Owner (s) Signature: Date: Owner (s) Signature: Date: Joni A. Zimmerman Digitally signed by Joni A. Zimmerman Date: 2023.01.05 16:17:20 -0700'

Date:



## 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 applic		<b>5</b>	
(Note: each request red			information to identify properties and
separate application form): the proposed development. Attached additional sheets if necessary.			
		Property Address(es):	
□ Appeal			
☐ Approval of Location		13830 Overlook Place	
☑ Board of Adjustment			
☐ Certification of Designation		Tax ID/Parcel Numbers(s)	Parcel size(s) in Acres:
□ Const. Drawings, Minor or Major			` '
☐ Development Agreeme		6205006003	5.48
☐ Final Plat, Minor or Maj			
☐ Final Plat, Amendment		Existing Land Use/Development:	Zoning District:
☐ Minor Subdivision	due aut	pg	
☐ Planned Unit Dev. Amendment,			RR-5 ▼
Major □ Preliminary Plan, Major or Minor			
☐ Rezoning	Of Willion		
☐ SIA, Modification		☐ Check this box if <b>Administrative Relief</b> is being requested in	
☐ SiA, Modification ☐ Sketch Plan, Major or Minor		association with this application and attach a completed	
☐ Sketch Plan, Revision		Administrative Relief request form.	
☐ Solid Waste Disposal Site/Facility		☐ Check this box if any <b>Waivers</b> are being requested in association	
☐ Special District		with this application for development and attach a completed	
Special Use		Waiver request form.	·
☐ Major		'	
☐ Minor, Admin or Renewal		Barana Orania Irana Iran	
☐ Subdivision Exception		PROPERTY OWNER INFORMATION: Indicate the person(s) or	
Vacation		organization(s) who own the property proposed for development.	
☐ Plat Vacation with ROW		Attach additional sheets if there are multiple property owners.	
☐ Vacation of ROW			
Variances		Name (Individual or Organization):	
□ Major			
☐ Minor (2 <sup>nd</sup> Dwelling or		Charles Sutton and Abigail Urish	
Renewal) □ Tower, Renewal		Mailing Address:	
☐ Vested Rights			
☐ Waiver or Deviation		13830 Overlook Place	
☐ Waiver of Deviation ☐ Waiver of Subdivision Regulations		Destine Telephone	Te
☐ WSEO	togalatione	Daytime Telephone:	Fax:
		970-985-5423	N/A
□ Other:			
		Email or Alternative Contact Information:	
This application form sl	hall be accompanied by	cksutton1981@gmail.com	
all required support materials.		CKSdttoff 190 f@gfflall.com	
For PCD	Office Use:	Description of the request: (s	ubmit additional sheets if necessary):
Date:	File:		
Rec'd By:	Receipt #:	Degreeting coordinates	book (oo o ottoobook for a skill infe)
J ·	15 - 10 -	Requesting a variance on set	back (see attached for add'l info)
		_	
DSD File #:			

Attachment for Additional Information for Board of Adjustment Application

Joni A. Zimmerman, LGA Studios, Applicant on behalf of Owner(s): Charles K. Sutton and Abigail Urish, 10380 Overlook Place

We are requesting a variance for the setback on the north property line for our client. Garage was existing and burned except for the foundation. Client would like to re-build garage in same location and use existing foundation. It is located 1.4' from the north property line and the setback requirement is 25 feet.



## 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): LGA Studios	
Mailing Address: 201 E. Las Animas St, Suite 113, Colora	ado Springs, CO 80903
Daytime Telephone: 719-635-0880 x101	Fax:
Email or Alternative Contact Information:	
AUTHORIZED REPRESENTATIVE(s): Indicate the person(s) aut (attach additional sheets if necessary).	norized to represent the property owner and/or applicants
Name (Individual or Organization):  LGA Studios	
Mailing Address: 201 E. Las Animas St., Suite 113, Colora	do Springs, CO 80903
Daytime Telephone: 719-635-0880 x101	Fax:
Email or Alternative Contact Information: joniz@lgastudios.com	
AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVE(S): An owner signature is not required to process a Type A or B Develop owner or an authorized representative where the application is accommand the person as the owner's agent	
Owner/APPLICANT AUTHORIZATION:  To the best of my knowledge, the information on this application and complete. I am fully aware that any misrepresentation of any information have familiarized myself with the rules, regulations and procedures that an incorrect submittal may delay review, and that any approval application and may be revoked on any breach of representation or required materials as part of this application and as appropriate to this materials to allow a complete review and reasonable determination may result in my application not being accepted or may extend the leall conditions of any approvals granted by El Paso County. I understare a right or obligation transferable by sale. I acknowledge that I use a result of subdivision plat notes, deed restrictions, or restrictive consubmitting to El Paso County due to subdivision plat notes, deed restrictions in the properties of the purposes of reviewing this development application proper facilities and safe access for inspection of the properties.	ation on this application may be grounds for denial or revocation. I with respect to preparing and filing this application. I also understand of this application is based on the representations made in the condition(s) of approval. I verify that I am submitting all of the sproject, and I acknowledge that failure to submit all of the necessary of conformance with the County's rules, regulations and ordinances negth of time needed to review the project. I hereby agree to abide by and that such conditions shall apply to the subject property only and derstand the implications of use or development restrictions that are enants. I agree that if a conflict should result from the request I am rictions, or restrictive covenants, it will be my responsibility to resolve cable review agencies, to enter on the above described property with fication and enforcing the provisions of the LDC. I agree to at all times rety by El Paso County while this application is pending.
Owner (s) Signature:	D /
Owner (s) Signature:  Joni A. Zimmerman Digitally signed by Jonathy Signature:  Applicant (s) Signature:	ni A. Zimmerman lanuary 5, 2023
Applicant (s) Signature:	Date: