

## 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): Colo Windermere #2, LLC (James Todd Stephens	9)
Mailing Address:	5)
4164 Austin Bluffs Pkwy. #361	
Daytime Telephone:	Email or Alternative Contact Information:
(719) 200-9594	todd@windsorridgehomes.com
additional sheets if necessary).	ized to represent the property owner and/or applicants (attach
Name (Individual or Organization): Kimley-Horn and Associates, Inc. (Noah Brehmer	, P.E.)
Mailing Address:	
2 North Nevada Ave. Suite 900 Colorado Springs	, CO 80903
Daytime Telephone:	Email or Alternative Contact Information:
(719) 453-0180	noah.brehmer@kimley-horn.com
OWNER/APPLICANT AUTHORIZATION:  To the best of my knowledge, the information on this application factual and complete. I am fully aware that any misrepresentation denial or revocation. I have familiarized myself with the rules, reapplication. I also understand that an incorrect submittal may design.	on and all additional or supplemental documentation is true.
the representations made in the application and may be revoked verify that I am submitting all of the required materials as part of acknowledge that failure to submit all of the necessary materials conformance with the County's rules, regulations and ordinance the length of time needed to review the project. I hereby agree to County. I understand that such conditions shall apply to the subsale. I acknowledge that I understand the implications of use or notes, deed restrictions, or restrictive covenants. I agree that if a Paso County due to subdivision plat notes, deed restrictions, or reconflict. I hereby give permission to El Paso County, and applications with or without notice for the purposes of reviewing this develop	ed on any breach of representation or condition(s) of approval. I of this application and as appropriate to this project, and I is to allow a complete review and reasonable determination of es may result in my application not being accepted or may extend a abide by all conditions of any approvals granted by El Paso oject property only and are a right or obligation transferable by development restrictions that are a result of subdivision plat a conflict should result from the request I am submitting to El restrictive covenants, it will be my responsibility to resolve any
Owner (s) Signature: Jane Lall Hest	Date: 11/8/2024
Owner (s) Signature:	Date:
Applicant (s) Signature: Jane lall Hope	Date: N/8/2024



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

Site Development Plan for multi-family residential

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## **Application Form**

Please check the applicable application type (Note: each request requires completion of a separate application form):	PROPERTY INFORMATION: Provide and the proposed developmen necessary.	information to identify properties t. Attach additional sheets if	
☐ Administrative Determination ☐ Administrative Relief ☐ Appeal ☐ Approval of Location ☐ Billboard Credit	Property Address(es): 7653 Mardale Ln. (Tract B, Windermere Filing No.		
<ul> <li>□ Board of Adjustment – Dimensional Variance</li> <li>□ Certificate of Designation</li> <li>□ Combination of Contiguous Parcels by Boundary Line Adjustment</li> <li>□ Construction Drawings</li> </ul>	Tax ID/Parcel Numbers(s) 5329416011	Parcel size(s) in Acres: 9.22 ac	
☐ Condominium Plat ☐ Crystal Park Plat ☐ Development Agreement ☐ Early Grading Request ☐ Final Plat ☐ Maintenance Agreement ☐ Merger by Contiguity ☐ Townhome Plat	Existing Land Use/Development:  Vacant		
	RM-30	Proposed Zoning District (if applicable):  N/A	
☐ Planned Unit Development ☐ Preliminary Plan ☐ Rezoning ☐ Road Disclaimer ☐ Road or Facility Acceptance	PROPERTY OWNER INFORMATION: Indicate the person(s) or organization(s) who own the property proposed for development. Attach additional sheets if there are multiple property owners.		
■ Site Development Plan  Sketch Plan  Solid Waste Disposal Site/Facility  Special District	Name (Individual or Organization):  James Todd Stephens		
☐ Special Use ☐ Subdivision Exemption ☐ Subdivision Improvement Agreement ☐ Variance of Use	Mailing Address: 4164 Austin Bluffs Pkwy. #361 Colorado Springs, CO 80918  Daytime Telephone:		
□ WSEO	(719) 200-9594		
This application form shall be accompanied by all required support materials.	todd@windsorridg		