

Planning and Community Development Department 2880 International Circle, Colorado Springs, CO 80910 Phone 719.520.6300 | Fax 719.520.6695 | www.elpasoco.com

pecessary)	nt than the property owner(s) (attach additional sneets
Name (Individual or Organization): Litman Sure	no Twest
Mailing Address: 18420 Meresler	Rd
Daytime Telephone: 719 4/39-2557 Fax:	
Email or Alternative Contact Information:	
AUTHORIZED REPRESENTATIVE(s): Indicate the person(s) authorized (attach additional sheets if necessary).	d to represent the property owner and/or applicants
Name (Individual or Organization):	· V
RANDY OLIPHANT (REO CONSTRUCTIO	N LIC)
12404 ANTLERS RIDGE DR. FALCON (Daytime Telephone: Fax:	co 8083/
Daytime Telephone: Fax:	
719-332-1789	
Email or Alternative Contact Information:	
REDCONS C YAHOO, COM	
AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVE(S): An owner signature is not required to process a Type A or B Development A owner or an authorized representative where the application is accompanie naming the person as the owner's agent	
Owner/Applicant Authorization: To the best of my knowledge, the information on this application and all add complete. I am fully aware that any misrepresentation of any information on have familiarized myself with the rules, regulations and procedures with resistant an incorrect submittal may delay review, and that any approval of this application and may be revoked on any breach of representation or condition required materials as part of this application and as appropriate to this project materials to allow a complete review and reasonable determination of conforming result in my application not being accepted or may extend the length of the all conditions of any approvals granted by El Paso County. I understand that are a right or obligation transferable by sale. I acknowledge that I understant a result of subdivision plat notes, deed restrictions, or restrictive covenants, submitting to El Paso County due to subdivision plat notes, deed restrictions any conflict. I hereby give permission to El Paso County, and applicable reforming the property by English and the property a	In this application may be grounds for denial or revocation. I appect to preparing and filing this application. I also understar application is based on the representations made in the on(s) of approval. I verify that I am submitting all of the ct, and I acknowledge that failure to submit all of the necessal ormance with the County's rules, regulations and ordinance time needed to review the project. I hereby agree to abide that such conditions shall apply to the subject property only and the implications of use or development restrictions that are a largered that if a conflict should result from the request I ames, or restrictive covenants, it will be my responsibility to resolve agencies, to enter on the above described property will and enforcing the provisions of the LDC. I agree to at all time EI Paso County while this application is pending.
Owner (s) Signature:	Date: $\frac{5-23-24}{2084}$
Owner (s) Signature: Mas/more	Date. 2/20/049
Applicant (s) Signature:	Date:



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Type C Application Form (1-2B)

DSD File #:			TYPE C APPLICATION FORM 1-2B Page 1 or 2
Rec'd By:	Receipt #:		
Date:	File:		
	PCD Office Use:		
required support		LOT FOR EXTENDED	FAMILY USE.
This application form shall be accompanied by all		CONSTRUCT ADDITIONAL R	ESIDENCE ON 37.86 AC
Easements Sight Visibili View Corrid	s ity	Description of the request: (atta	
□ Site Development Plan, Major □ Site Development Plan, Minor □ Early Grading or Grading □ ESQCP Minor Vacations (mark one) □ Vacation of Interior Lot Line(s) □ Utility, Drainage, or Sidewalk		Email or Alternative Contact Informa	tion:
		Daytime Telephone: 719-439-2557	Fax:
□ Major Final Plat □ Minor Subdivision with Improvements □ Site Development Plan, Major Mailing Address: /8420 // Merco			
Amendment ☐ Review of Construction Drawings ☐ Construction Permit		Name (Individual or Organization): PAULD P. TM AN	
	ng Review and Permits (mark one)	organization(s) who own the proper Attached additional sheets if there a	CONTRACTOR OF THE CONTRACTOR O
□ Rural Home	Occupation	Waiver request form. PROPERTY OWNER INFORMATION: Indicate the person(s) or	
		Check this box if Administrative Relief is being requested in association with this application and attach a completed Administrative Relief request form. Check this box if any Waivers are being requested in association with this application for development and attach a completed	
	Acceptance, Preliminary Acceptance, Final		
Preliminary Plan Maintenance Agr Minor PUD Amer Resubmittal of A		Existing Land Use/Development:	Zoning District:
☐ CMRS Co-Location Agreement ☐ Condominium Plat ☐ Crystal Park Plat ☐ Early Grading Request associated with a		Tax ID/Parcel Numbers(s) 4/000 00 426	Parcel size(s) in Acres:
☐ Administrative Relief ☐ Certificate of Designation, Minor ☐ Site Development Plan, Major ☐ Site Development Plan, Minor		Property Address(es): 18 420 MERIDIAN RD.	
	applicable application type est requires completion of a ion form):	PROPERTY INFORMATION: Provide information to identify properties and the proposed development. Attached additional sheets if necessary.	