



Planning and Community Development Department

2880 International Circle, Colorado Springs, CO 80910
Phone 719.520.6300 | Fax 719.520.6695 | www.elpasoco.com

Type C Application Form (1-2B)

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

- Administrative Relief
- Certificate of Designation, Minor
- Site Development Plan, Major
- Site Development Plan, Minor
- CMRS Co-Location Agreement
- Condominium Plat
- Crystal Park Plat
- Early Grading Request associated with a Preliminary Plan
- Maintenance Agreement
- Minor PUD Amendment
- Resubmittal of Application(s) (>3 times)
- Road or Facility Acceptance, Preliminary
- Road or Facility Acceptance, Final
- Townhome Plat

Administrative Special Use (mark one)

- Extended Family Dwelling
- Temporary Mining or Batch Plant
- Oil and/or Gas Operations
- Rural Home Occupation
- Tower Renewal
- Other _____

Construction Drawing Review and Permits (mark one)

- Approved Construction Drawing Amendment
- Review of Construction Drawings
- Construction Permit
- Major Final Plat
- Minor Subdivision with Improvements
- 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 Easements
- Sight Visibility
- View Corridor

Other: _____

This application form shall be accompanied by all required support materials.

PROPERTY INFORMATION: Provide information to identify properties and the proposed development. Attached additional sheets if necessary.

Property Address(es): 16530 Remington Rd Colorado Springs CO 80908	
Tax ID/Parcel Numbers(s) 5122004013	Parcel size(s) in Acres: 19.86
Existing Land Use/Development:	Zoning District: RR-5

- 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 Waiver request form.

PROPERTY OWNER INFORMATION: Indicate the person(s) or organization(s) who own the property proposed for development. Attached additional sheets if there are multiple property owners.

Name (Individual or Organization): Richard & Kimberly Monson	
Mailing Address: 16530 Remington Rd Colo Springs 80908	
Daytime Telephone: 951)368-3691	Fax:
Email or Alternative Contact Information: Kymmonson@gmail.com	

Description of the request: (attach additional sheets if necessary):

Detached Accessory Living Quarters for Elderly Parents
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For PCD Office Use:

Date:	File :
Rec'd By:	Receipt #:
DSD File #:	



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

Name (Individual or Organization):	
Mailing Address:	
Daytime Telephone:	Fax:
Email or Alternative Contact Information:	

N/A

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):	
Mailing Address:	
Daytime Telephone:	Fax:
Email or Alternative Contact Information:	

N/A

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: <u>2/10/21</u>
Owner (s) Signature: <u>[Signature]</u>	Date: <u>2/10/21</u>
Applicant (s) Signature: _____	Date: _____

**DETACHED ACCESSORY LIVING QUARTERS FOR PERMANENT OCCUPANCY COMPLIANCE
AFFIDAVIT**

I, Kimberly J. Monson, owner (or owner's agent for _____,)

have applied for approval of Detached Accessory Living Quarters for Permanent Occupancy for the purposes of _____
(description of family circumstances)
Caring for my elderly parents being duly sworn on oath,

deposes and says:

I, as applicant, own and hold title to the following described real property (hereinafter referred to as "the PROPERTY"), or have been given authority to represent the owner by an Owner's Affidavit of the PROPERTY for purposes of the above referenced applications:

16530 Remington Road, Colorado Springs, CO 80908 Street Address
Lot 1 Pegasus, Ex 4 that pt to rd by rec # 213146920 Legal Description
51220-04-013 Assessors Tax Schedule Number

El Paso County, Colorado

I hereby acknowledge and agree to the following:

"Pursuant to Chapter 5 of the El Paso County Land Development Code, I understand that Detached Accessory Living Quarters for Permanent Occupancy is not allowed resulting in more than one house on a parcel of land unless an affidavit is signed and recorded in the Office of the El Paso County Clerk and Recorder whereby I as Owner acknowledge and agree that the Detached Accessory Living Quarters for Permanent Occupancy proposed as part of this development application and to be located on the above non- permanent living arrangements to house immediate family members whom are elderly, disabled, or demonstrate a family need.

I hereby acknowledge that I have read, understand, and will abide by the provisions of the El Paso County Land Development Code, agree with the limitations contained in the County approval of my permit, and understand that failure to comply with the El Paso County Land Development Code or the conditions of my permit may result in enforcement actions which can result in enforcement actions which can result in the necessity to secure additional approvals or the requirement to remove the Detached Accessory Living Quarters for Permanent Occupancy accessory dwelling housing. I understand that it is my obligation to advise El Paso County, through the Planning and Community Development Department, of any change in family circumstances rendering the Detached Accessory Living Quarters for Permanent Occupancy unnecessary.

I understand that as owner I am responsible for maintaining compliance with all well permit or water use conditions or restrictions.

I understand the following definition applicable to Detached Accessory Living Quarters for Permanent Occupancy from the El Paso County Land Development Code:

Guest House

Lodging attached to the principal dwelling or located within a garage or accessory structure which may be occupied only by occasional, non-paying guests or visitors of the family residing in the principal dwelling. A guest house is no considered a dwelling unit. Detached Accessory Living Quarters for Permanent Occupancy is a form of guest house utilized on a non- permanent basis to house immediate family members that require housing due to age, disability, or family need. A family member shall be related by blood, half blood or at law, and which term "at law" also includes in-law relationships arising for a deceased or former spouse.

The Detached Accessory Living Quarters for Permanent Occupancy shall be removed within 3 months after the need no longer exists or 3 months after the date of the expiration of the permit, if one is specified, unless an application to legalize this use is submitted or an application to subdivide the property is submitted.

IN WITNESS WHEREOF, the parties hereto have hereunder set their hands and seal this 9th day of February, 2021.

OWNER STATE OF COLORADO

COUNTY OF EL PASO

Kimberly J. Monson
Owner Signature

Kimberly J. Monson 16530 Remington Rd. Colorado Springs CO 80908
Print Name, Mailing Address and Phone Number (951) 368-3691

The foregoing instrument was acknowledged before me this 9 day of FEBRUARY 2021

By KIMBERLY J MONSON, COUNTY OF EL PASO

My Commission expires 3-22-2023

Lawrence R Toomey
(Notary Public)

IN WITNESS WHEREOF, the parties hereto have hereunder set their hands and seal this 9 day of FEBRUARY, 2021.

LAWRENCE R TOOMEY
NOTARY PUBLIC - STATE OF COLORADO
NOTARY ID 19954002340
MY COMMISSION EXPIRES MAR 22, 2023