

DSD File #:

Planning and Community Development Department 2880 International Circle, Colorado Springs, CO 80910

Phone 719.520.6300 | Fax 719.520.6695 | <u>www.elpasoco.com</u>

Type C Application Form (1-2B)

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Please check the applicable application type (Note: each request requires completion of a separate application form):		<u>PROPERTY INFORMATION</u> : Provide information to identify properties and the proposed development. Attached additional sheets if necessary.					
		Property Address(es):					
□ Administrative Relief		1 Toperty Address(es).					
Ceytificate of Designation, Minor							
☐ Site Development Plan,							
☐ Site Development Plan,		Please mark		Tax ID/Parcel Numbers(s)		Parcel size(s) in Acres:	
CMB& Collobation Agr	eement	the box for		Tax ib/Faicei Nullibers(s)		Parcer size(s) in Acres.	
☐ Condominium Plat		major" and					
☐ Crystal Park Plat		unmark the hoy					
☐ Early Grading Request Preliminary Plan	associated	for "minor"		F. ::-4::	١.	7	
☐ Maintenance Agreemer	\			Existing Land Use/Development	t:	Zoning District:	
☐ Minor PUD Amendment							
☐ Resubmittal of Application(s) (>3 times)							
☐ Road or Facility Acceptance, Preliminary ☐ Road or Facility Acceptance, Final			_	Charlethia have if Administrative Polici is being grown and in			
☐ Townhome Plat			L	☐ Check this box if Administrative Relief is being requested in			
□ Townhome Flat				association with this application and attach a completed			
Administrative Special Use		·)		Administrative Relief request form.			
□ Extended Family Dwelling				☐ Check this box if any Waivers are being requested in association			
☐ Temporary Mining or Batch Plant				with this application for development and attach a completed			
☐ Oil and/or Gas Operations				Waiver request form.			
☐ Rural Home Occupation			·				
☐ Tower Renewal				PROPERTY OWNER INFORMATION: Indicate the person(s) or			
□ Other			О	organization(s) who own the property proposed for development.			
Construction Drawing Rev	iew and Pe	rmits (mark one)	Α	ttached additional sheets if the	ere are	e multiple property owners.	
☐ Approved Construction Drawing							
Amendment				Name (Individual or Organization	n):		
☐ Review of Construction Drawings			,	,			
☐ Construction Permit							
☐ Major Final Plat				Mailing Address.			
☐ Minor Subdivision with				Mailing Address:			
Improvements							
☐ Site Development							
☐ Site Development Plan, Minor			Daytime Telephone:		Fax:		
☐ Early Grading or Grading							
□ ESQCP							
Minor Vacations (mark one)				Email or Alternative Contact Information:			
□ Vacation of Interior)		Email of Automative Contact Information.			
☐ Utility, Drainage, o	\ \						
Easements							
☐ Sight Visibility							
☐ View Corridor			_				
□ Othor:			<u> </u>	escription of the request: ((attach	additional sheets if necessary):	
☐ Other:							
This application form sh	all be acco	omnanied by all					
required support materi		ompanioa by an					
For PCD Office Use:							
Date:	File :						
D 115							
Rec'd By:	Receipt	#:					



attach Authority to Represent/Owner's

Affidavit as noted above.

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<u>APPLICANT(s):</u> Indicate person(s) submitting the application necessary).	if different than the property owner(s) (attach additional sheets if							
Name (Individual or Organization):								
Mailing Address:								
Daytime Telephone:	Fax:							
Email or Alternative Contact Information:								
AUTHORIZED REPRESENTATIVE(s): Indicate the person(s) at	uthorized to represent the property owner and/or applicants							
(attach additional sheets if necessary).								
Name (Individual or Organization): M.V.E., Inc. / Dave Gorman								
Mailing Address:								
1903 Lelaray Street, Suite 200								
Daytime Telephone:	Fax:							
719-635-5736								
Email or Alternative Contact Information:								
daveg@mvecivil.co	m							
AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIV	E(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 accommodified naming the person as the owner's agent	companied by a completed Authority to Represent/Owner's Affidavit							
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 of any informati	mation on this application may be grounds for denial or revocation. I							
have familiarized myself with the rules, regulations and procedures that an incorrect submittal may delay review, and that any approve	s with respect to preparing and filing this application. I also understand							
application and may be revoked on any breach of representation of								
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 ap maintain proper facilities and safe access for inspection of the pro	oplication and enforcing the provisions of the LDC. I agree to at all times							
Augusticate byobal vakindes and adverse of introduction of another								
Owner (s) Signature:	Date: 13 Jan 23							
Owner (s) Signature:	Date:							
Owner (s) Signature.								
Applicant (s) Signature:	Date:							
If signing on bobolf of sweet places	Type C Applyoution Form 4 SP							
If signing on behalf of owner, please	Type C Application Form 1-2B							

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