

## 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)**

	- 710-0		-pp://www.			
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.			
□ 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			Property Address(es):			
			Tax ID/Parcel Numbers(s)	Parcel size(s) in Acres:		
			Existing Land Use/Development:	Zoning District:		
		☐ Check this box if <b>Administrative Relief</b> is being requested in association with this application and attach a completed Administrative Relief request form.				
			<ul> <li>Check this box if any Waivers are being requested in association with this application for development and attach a completed Waiver request form.</li> </ul>			
		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):				
			Mailing Address:			
			Daytime Telephone:	Fax:		
			Email or Alternative Contact Information:  Description of the request: (attack additional skiews if necessary).			
☐ Other:		\ <u> </u>  -	pescription of the request: Yattac	A additional streets in necessary).		
This application form sh required support materi	all be accompanied by all als.					
For PCD	Office Use:		Vour Lottor of Intent	is requesting a		
Date: File :			Your Letter of Intent commercial zone dis zone you are applyin	trict. Verify which		
Rec'd By:	Receipt #:		, , , , ,			
DSD File #:		-		Type C Application Form 1-2R		



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Please fill out all information to the boxes below.

APPLICANT(s): Indicate person(s) submitting the application if different than the property owner(s) (altacin additional species in necessary)

necessary).	
Name (Individual or Organization):	
Mailing Address:	
Daytime Telephone:	Fax:
Email or Alternative Contact Information:	
AUTHORIZED REPRESENTATIVE(s): Indicate the person(s) au (attach additional sheets if necessary).	uthorized to represent the property owner and/or applicants
Name (Individual or Organization):	
Mailing Address:	
Daytime Telephone:	Fax:
Email or Alternative Contact Information:	
	E(s): opment Application. An owner's signature may only be executed by the companied by a completed Authority to Represent/Owner's Affidavit
complete. I am fully aware that any misrepresentation of any informative familiarized myself with the rules, regulations and procedures that an incorrect submittal may delay review, and that any approva application and may be revoked on any breach of representation or required materials as part of this application and as appropriate to the materials to allow a complete review and reasonable determination may result in my application not being accepted or may extend the lall conditions of any approvals granted by El Paso County. I under are a right or obligation transferable by sale. I acknowledge that I a result of subdivision plat notes, deed restrictions, or restrictive of submitting to El Paso County due to subdivision plat notes, deed reany conflict. I hereby give permission to El Paso County, and approved that it is a provention of the prove	or condition(s) of approval. I verify that I am submitting all of the his project, and I acknowledge that failure to submit all of the necessary of conformance with the County's rules, regulations and ordinances length of time needed to review the project. I hereby agree to abide by estand that such conditions shall apply to the subject property only and understand the implications of use or development restrictions that are exercised by the subject property of the subject property of the subject property only and understand the implications of use or development restrictions that are exercised property as a conflict should result from the request I am estrictions, or restrictive covenants, it will be my responsibility to resolve plicable review agencies, to enter on the above described property with eplication and enforcing the provisions of the LDC. I agree to at all times
Owner (s) Signature:	Date:
Owner (s) Signature:	Date:

Applicant (s) Signature:

Date: