

Note
This is a
copy of the
letter sent to
adjacent Property
Owners

McGrady and Associates
James McGrady
2810 Andromeda Drive
Colorado Springs, CO 80906
719-494-3782 Mobile

January 10, 2017

RE: Notice to Adjacent Property Owners 13975 Highway 83 (Dr. and Mrs. Chung Owners)

This letter is being sent to you because Dr. and Mrs. Chung as applicant, and James McGrady as Project Coordinator, is proposing a land use project in El Paso County at 13975 Highway 83, Colorado Springs, CO, Schedule Number 6203000004. The parcel is further described as being located in the Southeast Quarter of Section 3, Township 12 South, Range 66 West, of the 6th P.M. This information is being provided to you, prior to a submittal with the County. Please direct any questions on the proposal to:

James McGrady (Project Coordinator)
2810 Andromeda Drive
Colorado Springs, CO. 80906
719-494-3782 Mobile
jmcgrady@comcast.net

OR

Mrs. Leisle Chung (Owner)
lchung@vanguardskin.com

Prior to any public hearing on this proposal a notification of the time and place of the public hearing will be sent to the adjacent property owners by the El Paso County Planning Department. At that time you will be given the El Paso County contact information, the file number, and an opportunity to respond either for, against, or expressing no opinion in writing or in person at the public hearing for this proposal.

The owner of this parcel is proposing to build a second home on the above described 35 acre parcel, that is currently zoned RR-5. Under an RR-5 zoning designation the maximum size of a second home is 1,500 square feet. In order to construct a second home larger than 1,500 square feet, which the owners would like to do, a variance of use is required. The proposed home will utilize the existing well, as permitted under Well Permit Number 212373. This well allows for ordinary household uses in up to three single family dwellings, the watering of domestic animals and the irrigation of not more than one acre of home gardens and lawns. Wastewater disposal will be done through an individual septic tank and absorption leach field. Other Utilities on site include gas,

electric and telephone. Access to the site will be along an existing driveway that serves several existing residences in the area. It is the owner's intent not to seek any variances related to setbacks and/or the height of the home.

The attached vicinity map (Exhibit A) shows the approximate location of the parcel and the proposed location of the above described second home.

Please return the attached form utilizing the enclosed self addressed stamped envelope and provide comments, if any, regarding the above described project.

Yours Truly,

James McGrady
President
McGrady and Associates
719-494-3782

Exhibit B

Petitioners

Dr. and Mrs. Vinh Chung
13975 Highway 83
Colorado Springs, CO 80921
lchung@vanguardskin.com

Project Coordinator for Petitioners

James McGrady
2810 Andromeda Drive
Colorado Springs, CO 80906
jmcgrady@comcast.net
719-494-3782

Description of Project:

Variance of Use RR-5 to allow the construction of a second home greater than 1,500 square feet in size on a parcel of land located at 13975 Highway 83.

The undersigned, being an adjacent property owner, has read the attached notification. I understand that I may appear in person at the advertised public hearing to further express my comments.

Date: _____

Owner

YES _____

NO _____

Name and Address

Comments

Signature

U.S. Postal Service
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For delivery information, visit our website at www.usps.com®.

COLORADO SPRINGS, CO 80921

Certified Mail Fee	\$3.30
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage	\$0.68
Total Postage and Fees	\$6.68

Sent To
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

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0606 06	Postmark Here
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COLORADO SPRINGS, CO 80920

Certified Mail Fee	\$3.30
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage	\$0.68
Total Postage and Fees	\$6.68

Sent To
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

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COLORADO SPRINGS, CO 80919

Certified Mail Fee	\$3.30
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage	\$1.68
Total Postage and Fees	\$5.68

Sent To
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

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7015 1730 0000 4787 7384

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CANYON COUNTRY, CA 91386

Certified Mail Fee	\$3.30
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage	\$0.68
Total Postage and Fees	\$6.68

Sent To
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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COLORADO SPRINGS, CO 80907

Certified Mail Fee	\$3.30
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage	\$0.68
Total Postage and Fees	\$6.68

Sent To
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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7015 1730 0000 4787 6141

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT

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For delivery information, visit our website at www.usps.com®.

COLORADO SPRINGS, CO 80908

Certified Mail Fee	\$3.30
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage	\$0.68
Total Postage and Fees	\$6.68

Sent To
Street and Apt. No., or PO Box No.
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0606 06	Postmark Here
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Certified Mail Receipts

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Ms. Julie Potter
 4040 Saunderton Grv.
 Co. Sprgs. Co. 80908-8561



9590 9402 2014 6123 5174 51

2. Article Number (Transfer from service label)
 7015 1730 0000 4787 6141

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 11/2/17

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Circle M Ranch LLLP
 P.O. Box 1642
 Canyon Country, CA
 91386-1642



9590 9403 0160 5120 3718 61

2. Article Number (Transfer from service label)
 7015 1730 0000 4787 7391

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 NOV 29 2016

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Letha Robison
 3235 Templeton Gap Rd
 Co. Springs, Co. 80907-5735



9590 9403 0160 5120 3718 54

2. Article Number (Transfer from service label)
 7015 1730 0000 4787 7391

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 11/18/16

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Zonta Partnership
7075 Campus Dr.
Suite 200
Co. Springs, Co. 80920-
6524



9590 9403 0160 5120 3718 47

2. Article Number (Transfer from service label)

7015 1730 0000 4787 7407

PS Form 3811, April 2015 PSN 7530-02-000-9053

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Alvin Harvey

Agent

Addressee

B. Received by (Printed Name)

Porsche Harvey

C. Date of Delivery

11-18-16

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

JBS Family Enterprises
6385 Corporate Dr
Suite 200
Co. Springs, Co 80919-5912



9590 9403 0160 5120 3718 30

2. Article Number (Transfer from service label)

7015 1730 0000 4787 7414

PS Form 3811, April 2015 PSN 7530-02-000-9053

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

C L Wise

Agent

Addressee

B. Received by (Printed Name)

C L Wise

C. Date of Delivery

11-18-16

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt