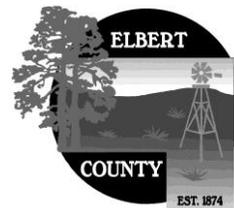




COUNTY OF ELBERT

COMMUNITY & DEVELOPMENT SERVICES

P.O. BOX 7
215 COMANCHE STREET
KIOWA, COLORADO 80117
303-621-3136 FAX: 303-621-3165
cde@elbertcounty-co.gov



ADMINISTRATIVE VARIANCE CHECK LIST SEE ZONING REGULATIONS PART I SECTION 3 E

Date: _____
Project Name: _____
Owner(s) Name(s): _____
Address: _____
Phone Number: _____

Applications must include the following information:

Date Completed

- | | |
|--|-------|
| 1. Completed Application Form | _____ |
| 2. Proof of Ownership
(Title Report and/or property deed) | _____ |
| 3. Statement of Taxes (from the Assessor's Office) | _____ |
| 4. Application Fee Paid \$ _____ (Amount) | _____ |
| 5. Completed Narrative _____ (Copies) | _____ |
| 6. Completed Site Plan Exhibit _____ (Copies)
(Professionally prepared) | _____ |

Action Date Set For:

15 days prior to the hearing date on:

Date: _____

Time: _____

- | | |
|--|-------|
| 7. Certified mail notifying adjacent property owners | _____ |
|--|-------|

5 business days prior to the hearing date:

- | | |
|--|-------|
| 8. Supply to the Planning Department | _____ |
| A. A copy of the notice to adjacent property owners | _____ |
| B. Alphabetical list and map of adjacent property owners | _____ |
| C. Certified mail receipts (white slips) | _____ |

By the Hearing Date:

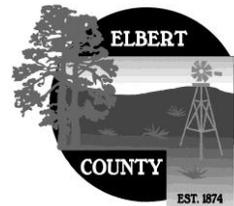
- | | |
|--------------------------------------|-------|
| 9. Supply to the Planning Department | _____ |
| A. Green postal return receipts | _____ |



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ADMINISTRATIVE VARIANCE APPLICATION

Variance Number: _____

NAME OF PROPERTY OWNER: _____

COMPLETE ADDRESS: _____

MAILING ADDRESS (If different from above):

TELEPHONE NUMBER(S): _____

LEGAL DESCRIPTION OF PROPERTY (Attach additional sheet(s) if necessary):

EXISTING ZONING ON PROPERTY: _____

EXISTING USES ON PROPERTY: _____

VARIANCE CONDITION/REQUEST (Brief written description required): _____

REASON FOR REQUESTED VARIANCE: _____

Signature: _____

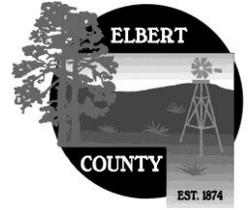
Date: _____



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I hereby acknowledge that I have been informed of the following:

- As part of the variance/administrative variance process, all work on the structure(s) involved must cease immediately. Failure to stop building will result in an automatic denial of the variance application.
- I understand that economic hardship is not a valid excuse to be granted a variance/administrative variance.

Signed & Acknowledged by (print, sign and date below).

(Signature)

(Date)

(Print Name)

(Address)

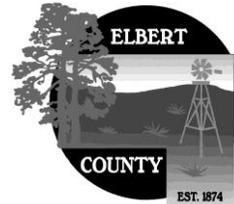
(Address)



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APPLICATION AGREEMENT FORM

PROJECT NAME: _____

PROJECT LOCATION: _____

The applicant agrees to pay for reasonable additional engineering and/or consultation when requested by the Community & Development Services Department, Planning Commission or Board of County Commissioners when, in their opinion, additional information, studies, or investigations are needed to help clarify the proposal made.

Applicant or Authorized Representative

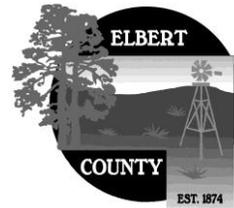
Date



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DISCLOSURE LETTER

PROJECT NAME: _____

PROJECT LOCATION: _____

I/We, _____

do hereby acknowledge my/our full awareness of the application/request being presented to Elbert County by

_____ for the parcel of land indicated, and for the reason(s) noted on the completed application/request submittal.

I/We hereby acknowledge the person(s) noted is/are my/our authorized representative(s) in the matter.

I/We hereby grant permission for the Elbert County Community & Development Services Department, or any referral agency they require, to access the parcel of land indicated for reasons of reviewing and evaluating the land use application.

Signature(s):

PRINT NAME AND COMPLETE ADDRESS OF PROPERTY OWNER(S) BELOW:

Name: _____

Date: _____

Address: _____

State of _____)

)

ss:

County _____)

The above and foregoing instrument was subscribed and sworn to before me, in my presence, a Notary Public in and for the County of _____, State of _____, this _____ day of _____, 20____.

(SEAL)
