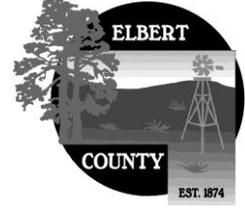


COUNTY OF ELBERT

Community & Development Services

P.O. BOX 7
215 COMANCHE STREET
KIOWA, COLORADO 80117
303-621-3136 FAX: 303-621-3165



Disclosure Letter

I, _____ do hereby acknowledge my full awareness of the application being presented to Elbert County by _____,

For the parcel of land indicated and for the reasons noted on the application. I hereby acknowledge the person or company noted herein is my authorized representative in this matter.

Signature (s) of property owner (s):

Signature

Date

Signature

Date

Printed name (s) and complete address of property owner (s) :

Name: _____

Name: _____

Address: _____

Address: _____
