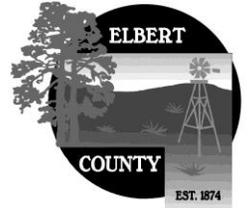




COUNTY OF ELBERT



COMMUNITY & DEVELOPMENT SERVICES

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

EXEMPTION FROM PLATTING CHECK LIST (May be Administrative) (SUBDIVISION REGULATIONS- SEE SECTION XII E) (Rezone application may apply)

Date: _____

Project Name: _____

Project Address: _____

Owner(s) Name(s): _____

Address: _____

Phone Number: _____

Application must include the following information:
(See Elbert County Subdivision regulations Section XII E (3))

Date:

- a. An application form provided by the County. _____
- b. Proof of Ownership. _____
- c. Statement of Taxes (from the Assessor's Office) _____
- d. Water Study. _____
- e. Proof of Septic. _____
- f. Proof of Access. _____
- g. Proof of Fire. _____
- h. Legal Description. _____
- i. Survey – An Exemption Survey in a format acceptable to the County. _____
- j. Other Reports. _____
- k. Flood Zone areas. _____
- l. Any deeds for dedications. _____
- m. Weed Management and Grazing Plans. _____

Public Hearing date set for Administrative Hearing

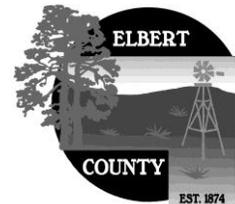
Date: _____
Time: _____



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ELBERT COUNTY LAND USE APPLICATION

PROJECT NAME: _____

PROJECT ADDRESS: _____

LOCATION: _____

LEGAL OWNER'S NAME(S): _____

ADDRESS: _____

TELEPHONE #: _____

ATTACH PROOF OF OWNERSHIP

Water Rights Owner(s): _____

Mineral Rights Owner(s): _____

Special Districts: _____

Proposal/Request: _____

Authorized Representative: _____

Name/Address: _____

Telephone #: _____

Legal Description of Property: Section(s) _____ Township _____ Range _____

Lot _____ Block _____

Subdivision _____

Property Tax Parcel Number: _____

COMPLETE ALL APPLICABLE SECTIONS

Present Zoning: _____ Proposed Zoning: _____
Gross Site Acreage: _____ Net Site Acreage: _____
Gross Site Density/acres: _____ # Lots/Dwelling Units: _____

Sources of Utilities: Water: _____ Electricity: _____
Sanitation: _____ Natural Gas: _____
Other: _____

Elbert County School Attendance (K-12): _____
Fire District: _____
Proposed Public Roadway Access: _____
TOTAL APPLICATION FEE \$ _____ AMOUNT RECEIVED \$ _____

DOCUMENTS SUBMITTED:

- | | |
|--|--------------------------------------|
| _____ Access Requests | _____ Plat Map |
| _____ Authorization for Representative | _____ Preliminary Construction Plans |
| _____ Cost estimates | _____ Proof of Ownership |
| _____ Drainage Report | _____ Soils Report |
| _____ Final Construction Plans | _____ Traffic Control Plan |
| _____ Landscape Plans | _____ Traffic Report |
| _____ Narrative | _____ Subdivision Summary Form |
| _____ Pavement Design Report | _____ Other |
| _____ Statement of Taxes (available from Assessors Office) | |
| _____ Grading, Drainage & Erosion Control Plan (required if adding, moving, or removing more than 300 cubic yards of dirt) | |

Review of this application and supportive documentation will not begin until the Community & Development Services Department deems the application complete. Applicant acknowledges that there is no mutually agreed upon time between the County and the applicant during which this application will be approved, conditionally approved or denied.

In addition to the standard Land Use Fees, the applicant is responsible for all Public Notice Costs (signs, legal notices, certified mail, etc.), as well as large envelopes and postage for Referral Agencies, Planning Commissioners and the Board of County Commissioners, etc.

Applicant's Signature(s): _____

Date: _____

State of)
County) ss:

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____.

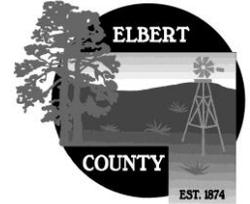
(SEAL)



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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

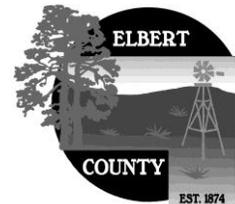
Date



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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____.

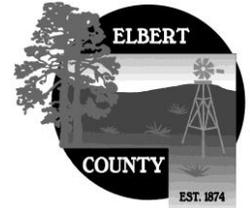
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AGREEMENT TO REMOVE PUBLIC NOTICE

PROJECT NAME: _____

PROJECT LOCATION: _____

I/We hereby agree to remove the Public Notice Sign posted for hearing notification within 7 days after the Board of County Commissioner's final hearing. I/We understand this must be completed as a condition of approval prior to the recording of the Mylars or Final Plats.

NAME: _____

SIGNATURE: _____

DATE: _____

NAME: _____

SIGNATURE: _____

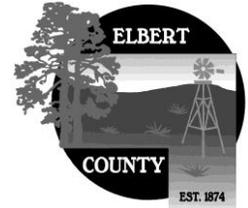
DATE: _____



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SUBDIVISION SUMMARY FORM

DATE: _____

TYPE OF SUBMISSION:

Request for Exemption _____

Preliminary Plan _____

Final Plat _____

SUBDIVISION NAME: _____ FILING: _____

LOCATION OF SUBDIVISION: _____ TOWNSHIP: _____ RANGE: _____ SECTION: _____

OWNER(S) NAME(S) _____

AND ADDRESS: _____

APPLICANT(S) REPRESENTATIVE: _____ ADDRESS: _____

	TYPE OF HOUSING UNITS	NUMBER OF DWELLINGS UNITS	AREA (ACRES)	PERCENT OF TOTAL AREA
()	Single Family			
()	Apartments			
()	Condominiums			
()	Mobile Homes			
()	Commercial			
()	Industrial			
()	Other (Specify)			

	SUBDIVISION AMENITIES	TYPE	AREA (ACRES)	PERCENT OF TOTAL AREA
()	Right of Ways (Streets)	Dedicated		
()	Right of Ways (Streets)	Private		
()	School Sites	Dedicated		
()	School Sites	Reserved		
()	Park Sites (Non Passive)	Dedicated		
()	Park Sites (Non Passive)	Private		
()	Trails	Public		
()	Trails	Private		
()	Open Space	Dedicated		
()	Open Space	Private		

ESTIMATED WATER REQUIREMENTS: _____ GALLONS/DAY

PROPOSED WATER SOURCE: _____

ESTIMATED SEWAGE DISPOSAL REQUIREMENTS: _____

PROPOSED MEANS OF SEWAGE DISPOSAL: _____

ACTION:

STAFF RECOMMENDATION:

APPROVAL ()

DENIAL ()

REMARKS: _____

DATE: _____

PLANNING COMMISSION RECOMMENDATION:

APPROVAL ()

DENIAL ()

REMARKS: _____

DATE: _____

BOARD OF COUNTY COMMISSIONERS:

APPROVAL ()

DENIAL ()

EXEMPTION UNDER C.R.S 30-28-101(d): _____

REMARKS (IF EXEMPTION, STATE REASON): _____

DATE: _____

NOTE: THIS FORM IS REQUIRED BY COLORADO REVISED STATUTES.