



# PARKER COLORADO

## TOWN OF PARKER COMMUNITY DEVELOPMENT DEPARTMENT LAND USE AND DEVELOPMENT APPLICATION

20120 E. Mainstreet, Parker, CO 80138

303/841.2332 (Phone) 303/841.3223 (Fax) <http://www.parkeronline.org> (internet)

### Instructions:

1. All applications must be typed or printed. Illegible applications may be rejected at the discretion of the Community Development Department.
2. All applicable sections must be completed, and the application signed by ALL parties of interest. Unsigned applications WILL NOT be processed.
3. All requisite Exhibit Attachments must be included if the application is to be deemed complete.

### Type of Application:

(Check All that Apply)

<input checked="" type="checkbox"/> Amendment to Comprehensive Plan	<input type="checkbox"/> Vacation of Lot Line or Easement
<input type="checkbox"/> Annexation & Rezoning	<input type="checkbox"/> Use by Special Review
<input type="checkbox"/> Rezoning or PD Amendment	<input type="checkbox"/> Variance
<input type="checkbox"/> Sketch Plan	<input type="checkbox"/> Site Plan
<input type="checkbox"/> Preliminary Plan	<input type="checkbox"/> Site Plan Amendment
<input type="checkbox"/> Final Plat	<input type="checkbox"/> Condo Plat
<input type="checkbox"/> Minor Development Plat	<input type="checkbox"/> Amendment to SIA or Recorded Plat
<input type="checkbox"/> Re-Plat	<input type="checkbox"/> Other:

### OFFICIAL USE ONLY

Case # \_\_\_\_\_

Trakit #:

Application Accepted by:

Date:

Fees:

Receipt No.:

Application Reviewed by:

Date:

Application Assigned to:

Date:

### Project Name:

### Address or General Location:

Section	10	<input type="checkbox"/> NW	<input type="checkbox"/> NE	<input type="checkbox"/> SW	<input type="checkbox"/> SE	Lot	1
Township	6 S.					Block	
Range	66 W.					Filing No.	#1
Total Acres: Gross	36.35	Net	36.35				

Requested Application in Detail: Addition of a roughly 400 s.f. salt storage shed along with a drive and some trees for screening on the east side of the shed.

### Property Owner of Record:

### Applicant (if different from Property Owner):

Name: Jonathan Fisher  
 Company: Parker Adventist Hospital  
 Address: 188 Inverness Drive West  
 Suite 500  
 Phone: 303.267.9158 Fax: 303.804.8195  
 Email: MichaelEdwards@Centura.org

Name: Jason Christiansen  
 Company: Boulder Associates Architects  
 Address: 1426 Pearl Street  
 Suite 300  
 Phone: 303.499.7795 Fax: 303.499.7767  
 Email: JChristiansen@boulderassociates.com

### Project Representative or Consultant:

### For Subject Property, List Utility Providers

Name: Jason Christiansen  
 Company: Boulder Associates Architects  
 Address: 1426 Pearl Street  
 Suite 300  
 Phone: 303.499.7795 Fax: 303.499.7767  
 Email: JChristiansen@boulderassociates.com

Water: Cottonwood  
 Sanitary Sewer: Cottonwood  
 Electricity: IREA  
 Gas: NTherm  
 Telephone: Century Link  
 Cable: Don Lora Electronics  
 Fire Protection: South Metro Fire

Note: Unless otherwise specified, all correspondence from the Town will be directed to the project representative.

### Current Property Zoning & Use:

### Proposed Property Zoning & Use:

Zoning: PD  
 IF PD, Specify Use: Medical / Hospital  
 Current Use: Medical / Hospital  
 Subdivision: Crown Point F#1, 26th Amendment

Requested Zoning: No change to existing zoning  
 If Applicable PD Name:  
 If Rezoning Total Acreage:  
 Proposed Use:

### Proposals For Construction of New Residential, Commercial, or Industrial Buildings or Space

Has prior residential project been approved for all or part of this project Yes  No  Total residential dwelling units requested: \_\_\_\_\_

Indicate total number of units: \_\_\_\_\_ Single Family Detached: \_\_\_\_\_ Single Family Attached: \_\_\_\_\_

Multi-Family/Condominiums/Townhomes: \_\_\_\_\_

**COMMERCIAL/INDUSTRIAL**

**Indicate the type of commercial/industrial development proposed (Check all that applies)**

Retail     
 Other Commercial     
 Medical/Dental Office     
 High Tech Office     
 Business/Professional Office  
 Light Industrial     
 Warehouse     
 Other

Please provide additional descriptions as appropriate: Medical / Hospital

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**What type of gross leasable square footage for each category indicated above?**

Type	No. of Buildings	Gross Square Footage	Leasable Square Footage
No change to existing leasable s.f.			

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**By signing below, the Land Owner of Record, Applicant and Project representative are indicating that each understands and agrees to the following terms:**

1. Authorized personnel from the Town of Parker, and its consultants, are hereby granted the right to enter the subject property for the purposes of reviewing and processing the application.
2. The Property Owner of Record acknowledges and agrees that the Town of Parker may file liens against the subject property for any unpaid financial obligation owed to the Town related to reviewing and processing the application.
3. There are no known geologic, physical or biologic hazards, or vicious animals present on the subject property except as indicated in the attached Exhibit D.
4. All requirements for submission of this application for reviewing and processing by Town of Parker Community Development Department made in accordance with the Town's Land Development Code, and any and all applicable Town of Parker Ordinances and Resolutions.
5. All requisite fees have been paid to the Town of Parker.
6. All information contained in this application, the attached Exhibits, and other materials submitted in connection with this application are true and accurate to the best knowledge of the Applicant, Land Owner of Record and Project Representative. It is clearly understood and agreed to that false or untruthful information may be grounds for the Town to stop processing this application or withdrawing any approval granted based upon such false or untruthful information.
7. The Town of Parker is under no obligation to approve the request contained in the application. No promises of approval are conveyed with the acceptance of this application.

**8. The schedule of Exhibit attachments, as described below, accompanies this application:**

Exhibit A: Legal Description of Property.

Exhibit B: Title Policy, current to within thirty (30) days of the date of signatures below.

Exhibit C: Letter of Authorization from the Property Owner of Record, allowing Applicant and Project Representative to act on their behalf, and accepting ultimate financial obligation for expenses incurred by the Town of Parker as a result of the evaluation of this request.

Exhibit D: Disclosure of any Geologic, Physical or Biologic Hazard present on site, or any vicious animals in residence on property.

Exhibit E: Vicinity Map of Project Site.

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**Property Owner of Record:**

Print Name: ~~Michael Edwards~~ Jonathan Fisher

Signature: *[Signature]* Date: 12-10-19

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**Applicant, if different from Property Owner:**

Print Name: Jason Christiansen

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Project Representative or Consultant**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**SIGNATURES**

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