



20120 E. Mainstreet, Parker, CO 80138 303.841.2332 (Phone) 303.841.3223 (Fax) <http://www.parkeronline.org>

Instructions:

1. All applications must be typed or printed. Illegible applications may be rejected at the discretion of the Town.
2. All applicable sections must be completed and **signed by ALL parties of interest on page 2. 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 type="checkbox"/> Amendment to Comprehensive Plan	<input type="checkbox"/> Vacation of Lot Line or Easement	<input type="checkbox"/> Final Plat
<input type="checkbox"/> Annexation & Rezoning	<input type="checkbox"/> Use by Special Review	<input type="checkbox"/> Minor Development Plat
<input type="checkbox"/> Rezoning or PD Amendment	<input type="checkbox"/> Variance	<input type="checkbox"/> Re-Plat
<input type="checkbox"/> Sketch Plan	<input type="checkbox"/> Site Plan	<input type="checkbox"/> Condo Plat
<input type="checkbox"/> Preliminary Plan	<input checked="" type="checkbox"/> Site Plan Amendment	<input type="checkbox"/> Amendment to SIA or Recorded Plat
		Other: _____

PROPERTY	Address or General Location: 9395 Crown Crest Blvd.
	Parcel Number(s) if known 223310213036
	Brief project description: The project is a 135,500 SF 5-story addition including the core and shell and interior fit out to the existing AdventHealth Parker Hospital. There will also be 64,500 SF of renovation space, for a total project scope of 200,000 SF. The project includes an emergency department remodel and expansion, a new Cath and IR department, new sterile processing department, additional operating rooms and support space, two new floors of 30-bed med surgical units and one floor shelled for a future 30 bed med surgical unit. The project also includes an expansion dock and relocation of the existing helipad.

Property Owner of Record:		Applicant (if different from Property Owner):	
Name:	Brett Spenst	Name:	Jessica Clafin
Company:	Portercare Adventist Health System	Company:	Boulder Associates Architects
Address:	6061 S. Willow Drive, Suite 210 Greenwood Village, CO 80111	Address:	1426 Pearl St. Suite 300 Boulder, CO 80302
Phone:	(303) 269-4000 Fax:	Phone:	(303) 499-7795 Fax:
Email:	Brett.Spenst@AdventHealth.com	Email:	jclafin@boulderassociates.com
Project Representative or Consultant:		Other/Additional	
Name:	Same as Applicant	Name:	Valerie Wilkins
Company:		Company:	Adams
Address:		Address:	336 Broad Street, Suite 300 Rome, GA 30161
Phone:	Fax:	Phone:	(720) 799-3041 Fax:
Email:		Email:	vwilkins@adamspmc.com
<i>Note: All correspondence is sent to the project representative. If the project representative is the owner, or applicant, write in "same as owner" or "same as applicant" in the above section.</i>		Project Role	

Signatures Required on Page 2

By signing below, each party are indicating that they understand and agree to the following terms:	
ACCEPTANCE OF 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. By submitting this development application, you acknowledge that all materials submitted to the Town for review are subject to inspection via public records requests, as governed by the Colorado Open Records Act. Additionally, you acknowledge the application package will be made available for public review via the Town's webpage. Protection of any copyrighted materials is solely the responsibility if the applicant.
	9. 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.	
Property Owner of Record:	
Print Name:	Brett Spenst
Signature:	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; font-size: x-small; margin-right: 5px;">DocuSigned by:</div> <div style="margin-left: 20px; border: 1px solid black; padding: 2px; font-size: x-small;">Date:</div> <div style="margin-left: 10px; border: 1px solid black; padding: 2px; font-size: x-small;">5/17/2024</div> </div>
Applicant, if different from Property Owner	
Print Name:	Jessica Claflin
Signature:	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 100%; height: 20px; margin-right: 5px;"></div> <div style="margin-left: 20px; border: 1px solid black; padding: 2px; font-size: x-small;">Date:</div> <div style="margin-left: 10px; border: 1px solid black; padding: 2px; font-size: x-small;">5/20/2024</div> </div>
Project Representative or Consultant	
Print Name:	Same as Applicant
Signature:	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 100%; height: 20px; margin-right: 5px;"></div> <div style="margin-left: 20px; border: 1px solid black; padding: 2px; font-size: x-small;">Date:</div> </div>
Additional	
Print Name:	Valerie Wilkins
Signature:	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 100%; height: 20px; margin-right: 5px;"></div> <div style="margin-left: 20px; border: 1px solid black; padding: 2px; font-size: x-small;">Date:</div> <div style="margin-left: 10px; border: 1px solid black; padding: 2px; font-size: x-small;">5/20/2024</div> </div>
G:\Planning\Development Assistance Packets	

SIGNATURES