



**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:**

**OFFICIAL USE ONLY**

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

*(Check All that Apply)*

<input 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 checked="" type="checkbox"/> Amendment to SIA or Recorded Plat
<input type="checkbox"/> Re-Plat	<input type="checkbox"/> Other: _____

<b>Trakit #:</b>	_____
<b>Application Accepted by:</b>	_____
<b>Date:</b>	_____
<b>Fees:</b>	_____
<b>Receipt No.:</b>	_____
<b>Application Reviewed by:</b>	_____
<b>Date:</b>	_____
<b>Application Assigned to:</b>	_____
<b>Date:</b>	_____

**Project Name:** Trails at Crowfoot Filing 8

**Address or General Location:** Bayou Gulch Rd and Shasta Daisy

<b>PROPERTY</b>	Section <input type="text" value="9"/> <input type="checkbox"/> NW <input type="checkbox"/> NE <input checked="" type="checkbox"/> SW <input type="checkbox"/> SE	Lot
	Township <input type="text" value="7"/>	Block
	Range <input type="text" value="66"/>	Filing No. <input type="text" value="6"/>
	Total Acres: Gross <input type="text" value="14.782"/> Net <input type="text" value="11.089"/>	

Requested Application in Detail: The purpose of this application is to request a permit cap increase for Trails at Crowfoot prior to the pool being complete.

**Property Owner of Record:**

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

Name:	Dan Galasso
Company:	TriPointeHomes
Address:	8055 E. Tufts Avenue Suite 675 Denver, Co 80237
Phone:	720.341.3108
Email:	Dan.Galasso@TriPointeHomes.com

Name:	Matt Janke
Company:	HR 935 LLC
Address:	7353 S. Alton Way Suite A100 Centennial Co, 80112
Phone:	303.994.5357
Email:	MJanke@e5xmanagement.com

**Project Representative or Consultant:**

**For Subject Property, List Utility Providers**

Name:	Matt Janke
Company:	HR 935 LLC
Address:	7353 S. Alton Way Suite A100 Centennial Co 80112
Phone:	303.994.5357
Email:	MJanke@e5xmanagement.com

Water:	PWSD
Sanitary Sewer:	PWSD
Electricity:	IREA
Gas:	Xcel
Telephone:	Century Link
Cable:	Comcast
Fire Protection:	South Metro

*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:	Residential
IF PD, Specify Use:	SFf
Current Use:	SFf
Subdivision:	Trails at Crowfoot

Requested 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 <input type="checkbox"/> No <input type="checkbox"/>	Total residential dwelling units requested: _____
Indicate total number of units: _____	Single Family Detached: _____	Single Family Attached: _____
Multi-Family/Condominiums/Townhomes: _____		

**PROPERTY CONTACTS PROJECT INFO**

**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:

COMMERCIAL/INDUSTRIAL

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

Type	No. of Buildings	Gross Square Footage	Leasable Square Footage

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

ACCEPTANCE OF TERMS


- 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.
- 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.
- 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.
- 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.
- All requisite fees have been paid to the Town of Parker.
- 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.
- 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.

SIGNATURES

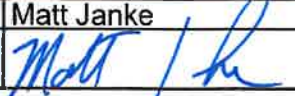
**Property Owner of Record:**

**Print Name:** Daniel A. Galasso  
**Signature:**  **Date:** 10/25/2021

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

**Print Name:** Matt Janke  
**Signature:**  **Date:** 10/25/21

**Project Representative or Consultant**

**Print Name:** Matt Janke  
**Signature:**  **Date:** 10/25/21