

Planning Department

• P.O. Box 99 • 1026 Park Avenue • Grand Lake, CO 80447 • Phone: 970-627-3435 • Fax: 970-627-9290 glplanning@townofgrandlake.com • www.townofgrandlake.com

LAND USE REQUEST APPLICATION

Street Address: Legal Description: Lot 9, 10, &11 Block 36 Subdivision Grand Lake Existing Use of Property; Vacant Land PROPERTY OWNER INFORMATION: Mailing Address: PO Box 1155 Phone: 303-242-9575 City: Grand Lake State: CO 7ip: 80447 Fax: APPLICANT INFORMATION: Name: Thomas H. Jenkins Email: tom@gatewayinn.com Mailing Address: PO Box 1155 Phone: 303-242-9575 City: Grand Lake State: CO 7ip: 80447 Fax: APPLICANT INFORMATION: Is the Applicant the Property Owner? X YES NO Name: Email: Mailing Address: Phone: City: State: Zip: Fax: TYPE OF REVIEW (Check all that apply): New Planned Development Conditional Use Permit Special Use Permit Annexation Rezoning Existing Subdivision Plat Amendment New Subdivision Redevelopment Other: Roadway Specification 11-2-4(D)(3) REQUEST (Brief Description): Request Variance for road grade above 8% and approve triple driveway. This is because the existing terrain is too steep. REQUIRED INFORMATION CHECKLIST: X Site Plan (Showing dimensions to existing and proposed features, locations of specific activities, proposed and existing signage, parking, ingress and egress points, traffic circulation, utilities, drainage features, and property lines) Statement of Authority (If applicable. Required for representatives of entities and property owners.) REQUIRED INFORMATION (If applicable. Required for representatives of entities and property owners.) Application Deposit (See Fee and Deposit schedule for amount) Additional Information (If applicable. Staff may require other helpful information for review.)			
Legal Description: Lot 9, 10, &11 Block 36 Subdivision Grand Lake	PROPERTY LOCATION:		
PROPERTY OWNER INFORMATION: Name: Thomas H. Jenkins	Street Address:		
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Name: Thomas H. Jenkins	Existing Use of Property: Vacant Land		
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Mailing Address: PO Box 1155			
APPLICANT INFORMATION: State: CO Zip: 80447 Fax:			
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Mailing Address:			
TYPE OF REVIEW (Check all that apply): New Planned Development			
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New Planned Development	City.	Suite	
New Planned Development	TYPE OF REVIEW (Check all th	at apply):	
Change to a non-conforming Use/Structure			
Annexation	1 = -		
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correct to the best of my knowledge. I further understand that submission of false or misleading information shall be sufficient cause for this application to be denied or may delay review by the Town. Print Name: Thomas H. Jenkins			
Signature: hono flushin Date: 07/12/2022	C/P A E/P LICE ONLY		
Signature: homo flushim Date: 07/12/2022	STAFF USE ONLY		
STAFF USE ONLY	Application Received By: kwhite Date & Time: 7/12 4:15p		

Deposit: YES X NO

File Name:

Amount: \$ 250