



## GENERAL DEVELOPMENT APPLICATION

448 East First Street, Suite 112

Salida, CO 81201

Phone: 719-530-2626 Fax: 719-539-5271

Email: [planning@cityofsalida.com](mailto:planning@cityofsalida.com)

### 1. TYPE OF APPLICATION (Check-off as appropriate)

- ☐ Annexation
- ☐ Pre-Annexation Agreement
- ☐ Variance
- ☐ Appeal Application (Interpretation)
- ☐ Certificate of Approval
- ☐ Creative Sign Permit
- ☐ Historic Landmark/District
- ☐ License to Encroach
- ☐ Text Amendment to Land Use Code
- ☐ Watershed Protection Permit
- ☐ Conditional Use

☐ Administrative Review:

(Type) \_\_\_\_\_

☒ Limited Impact Review:

(Type) > 4 Res. units

☐ Major Impact Review:

(Type) \_\_\_\_\_

☐ Other: \_\_\_\_\_

### 2. GENERAL DATA (To be completed by the applicant)

#### A. Applicant Information

Name of Applicant: Chaffee Housing Trust

Mailing Address: PO Box 692, Buena Vista, CO 81211

Telephone Number: 719-239-1199 FAX: n/a

Email Address: read@chaffeehousing.org

Power of Attorney/ Authorized Representative: \_\_\_\_\_

(Provide a letter authorizing agent to represent you, include representative's name, street and mailing address, telephone number, and FAX)

#### B. Site Data

Name of Development: M & 3rd

Street Address: TBD - City lot SE of M St. & 3rd St. intersection

Legal Description: Lot \_\_\_\_\_ PT Lot 4-6 Strip Eddy Bros. Add. Block C Subdivision \_\_\_\_\_ (attach description)

Disclosure of Ownership: List all owners' names, mortgages, liens, easements, judgments, contracts and agreements that run with the land. (May be in the form of a current certificate from a title insurance company, deed, ownership and encumbrance report, attorney's opinion, or other documentation acceptable to the City Attorney)

I certify that I have read the application form and that the information and exhibits herewith submitted are true and correct to the best of my knowledge.

Signature of applicant/agent Read McCulloch Date 10/23/20

Signature of property owner [Signature] Date 10.30.20