



Custer County, Colorado
Planning and Zoning Office
Westcliffe, CO 81252

Request for Setback Variance

Requires action by the Board of Zoning Adjustment

Setback: The minimum distance in linear feet measured horizontally between the outer perimeter of a structure, at grade, and each of its lot lines. (See Section 6.2 Required Setbacks, Custer County Zoning Resolution.)

Submit this completed application and all attachments with the appropriate application fee at least thirty (30) days prior to the meeting you wish to have your request scheduled. The application will not be accepted unless complete, including fee and attachments. Fee is non-refundable.

Any correspondence and/or documents submitted concerning this application are public record.

Land Owner of record: _____
All land owners must be listed on this application. TYPE OR PRINT LEGIBLY IN BLACK OR BLUE INK

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Home: (_____) _____ Business: (_____) _____

Cell: (_____) _____ e-mail: _____

Applicant: _____
(If different than above)

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Home: (_____) _____ Business: (_____) _____

Cell: (_____) _____ e-mail: _____

Tax schedule number for the property: _____
(Assigned by the County Assessor's Office - Shown on the Tax Bills)

Legal description of the property: _____

Property Address: _____

Size of property: _____

Zone: _____

Applicant's statement: Briefly explain your waiver request and the reasons for it. (This statement will be used in the public notice, letters to adjoining property owners and other interested parties.)

Setback being requested:

Give distances shown in feet on sketch of the property for all sides of the structure that will **NOT** meet the setback requirement.

Shortest distance between the structure and all verified property lines:

Amount of variance: _____

Amount of variance: _____

Amount of variance: _____

Amount of variance: _____

Additional documentation as checked below:

- Plot plan drawn to scale, or survey of property. (This must include existing structures, uses of structures, wells, and septic systems; their distances from property lines; and access to the property. Also include all future structures planned for your property.)
- Name and address of current lien holder
- Letter of compliance from HOA/POA
- Owners and Encumbrances (O&E) Report or recent Title Report
- Requirements from the appropriate special district(s)

- Authority to act *if the applicant cannot attend the meeting and/or the site tour.*

I, _____, authorize _____
to make binding commitments on my behalf.

X _____

X _____

I understand that:

- ❖ members of the Board of Zoning Adjustment and Planning and Zoning Office staff may visit the property which is the subject of this application.
- ❖ I, or my authorized representative, will be present to explain the request and I must clearly mark the locations in question on my property.
- ❖ the fact I have made this request does not relieve me of the obligation of applying for, and having been granted, a zoning and septic permit as required by the County before proceeding with construction of a building or installation of a septic facility of any kind.

I acknowledge that I am responsible for complying with the Custer County Zoning Resolution. I have read and understand the above, and the information I have provided is complete and accurate to the best of my knowledge.

Signature of Landowner

Date

Signature of Applicant, if different

Date

Make check payable to Custer County and return check and permit form to:

Custer County Planning and Zoning
P. O. Box 203
Westcliffe, CO 81252
(719) 783-2669
Planning_zoning@CusterCountyGov.com
CusterCountyGov.com

Office Use Only

Tax schedule number: _____

Site tour date: _____ Time: _____

Hearing date: _____ Time: _____

Location: Custer County Courthouse

Submitted: _____ Fee paid: \$_____

Copy of application sent to applicant: _____

Adjoining property owners notified: _____

Public notice: _____

Plot plan verified: _____

Easements existing? Yes No If yes, attach description from plat or covenants

Authorization to act received: _____

Legal source of water: _____

Deed(s) verified: _____ Taxes paid: _____

Comments: _____

Approved date: _____ Denied date: _____

Letter of approval or denial sent to applicant: _____

Recorded in Clerk's Office: _____ Reception number: _____