

Custer County Board of Commissioners
Custer County Courthouse
Westcliffe, CO 81252
Request for Setback Variance

Submit this completed application and all attachments with the \$300.00 application fee at least 30 days prior to the meeting you wish to have your request scheduled. The application and fee will not be accepted unless complete, including attachments. Application fee is non-refundable.

Land Owner _____

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 (____) _____

Applicant _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone (Home) (____) _____ Business (____) _____

Legal description of the property: _____

Property address: _____

Applicant's statement: Briefly explain your request and the reasons for it. Include a description of your future plans. (This statement will be used in letters to adjoining property owners and other interested parties.)

Setback being requested:

Give distances and compass direction for all sides of the structure that will not meet the setback requirement.

Shortest distance between the structure and property line: _____
Compass direction for this side of the structure: N NE E SE S SW W NW

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Compass direction for this side of the structure: N NE E SE S SW W NW

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Compass direction for this side of the structure: N NE E SE S SW W NW

Amount of variance: _____ Direction of variance: _____

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Attachments:

Plot plan drawn to scale, or survey of property. (This must include existing structures, wells, and septic systems; their distances from property lines; and access to the property. Also include all future structures planned for your property.)

Additional documentation if needed:

 Name and address of current lien holder, if any.

[] Written authority to act as agent if the applicant cannot attend the meeting. Authority must include the statement "agent is authorized to make binding commitments on behalf" of the owner.

[] _____

[] _____

I understand that members of the Board of Zoning Adjustment, Planning Commission, Board of County Commissioners, and Planning and Zoning Office staff may visit the property which is the subject of this application. I also understand that either myself or my representative should be present to explain my request, or I should clearly mark the locations in question on my property.

I understand that if this variance is approved, I will have two years from the date the variance is issued to act upon it by purchasing the zoning permit for this structure and beginning construction. If this variance is not acted upon within the time limit, the variance automatically expires.

I understand that the fact I have applied for a Setback Variance does not relieve me of the obligation of applying for and having been granted a zoning and/or septic permit issued by the County before proceeding with construction of a building or installation of a septic facility of any kind.

Signature of Applicant

Make check payable to Custer County and return to:

Custer County Planning and Zoning
P. O. Box 203
Westcliffe, CO 81252