



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

# Request for Overheight Variance

Requires action by the Board of Zoning Adjustment

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: \_\_\_\_\_



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.
- ❖ if this variance is approved, I will have two (2) 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 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.

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Signature of Landowner

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Date

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Signature of Applicant, if different

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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