



City of Victor
500 Victor Avenue
Victor, CO 80860
719-689-2284
cityofvictor.com

ZONING APPLICATION FORM

- Check One: Variance Temporary Use/Temporary Structure
- New Construction/Addition/Drainage Base Rezoning Conditional Use
- Nonconforming Use Amended Plat New Subdivision/PUD
- Lot Split Lot Line Elimination Street Vacation Appeal

SUBJECT PROPERTY ADDRESS: _____

LEGAL DESCRIPTION: *(Provide at least one of the following)*

Lot(s) _____ Block _____ Subdivision _____

County Parcel Identification No. or ID No. _____

PROPOSED AMENDED LEGAL DESCRIPTION (if applicable): _____

APPLICANT	PROPERTY OWNER
Name: _____	Name: _____
Company: _____	Company: _____
Address: _____ _____	Address: _____ _____
Telephone Number: _____	Telephone Number: _____
Fax Number: _____	Fax Number: _____
Email Address: _____	Email Address: _____
_____ Signature	_____ Signature

(Attach Appropriate Checklist and all required documents - Incomplete applications will not be accepted.)

Please complete Project Details on second page of this document.

PROJECT DETAILS

Uses and Zoning

Proposed Use(s): _____

Current Zoning: _____ Rezoning Proposed? Yes No Unknown

Proposed Zone District: _____ Located in Historic District? Yes No Unknown

Development Details

Size of Development Parcel (in acres): _____ Size of Development Parcel (in sq. ft.): _____

Number of existing units: _____ Number of existing structures: _____ Structures to remain: _____

Number of Proposed Units: _____ Units for Sale/Lease: _____

No. of Proposed Structures: _____ Gross Floor Area (sq. ft.): _____ Accessory Buildings (sq.ft): _____

Building Footprint (sq. ft): _____ Lot Coverage (%): _____

Height (ft.): _____ Height (stories): _____ Proposed Building Form: _____

Proposed Number of Parking Spaces: _____ Parking Ratio (spaces per resident/customers): _____

Project Street Frontage: _____ Will the project be phased? Yes No

Estimated Valuation: _____ Estimated Start Date: _____ Estimated Completion Date: _____

Method of Water and Sewer Supply: _____

Staff Use Only

Date Received: _____

Received By: _____

Fee Received: \$ _____

Location Survey Required: _____

Zone District: _____

Staff Assignment: _____

Plat Required.: _____

Public Hearing Required: _____