



LAND USE MAP AMENDMENTS CHECKLIST

The following checklist is intended to provide an outline for applicants to ensure a complete submittal and to avoid processing delays due to inadequate information. If an item is not checked as included in the submittal, a detailed narrative statement outlining reasons why the item has not been submitted shall be included. Lack of such statement or required item shall constitute an incomplete submittal and shall be rejected by the Town.

The Planning Commission shall consider the following criteria in regard to the approval or rejection of any proposed amendment to the Plan:

- a. Conformance with the goals and policies outlined in the Comprehensive Plan;
- b. Compatibility with existing and planned land uses;
- c. Minimizing detrimental impacts to the existing or planned transportation system; and
- d. Adequacy of existing or planned service capabilities i.e. sanitary sewer, water, etc.

Adoption of the proposed amendments to the Plan shall be in full compliance with all requirements for such comprehensive plan amendments as outlined in the Colorado Revised Statutes and the Windsor Municipal Code.

1	<u>SUBMITTAL REQUIREMENTS:</u>	
	Planning Department Checklist	*Applicant Checklist
	_____	_____
		Completed checklist. Items not checked are explained in the narrative
	_____	_____
		Completed attached application with signature of property owner(s) <i>(If multiple owners, please use attached page for additional owner signatures and contact information.)</i>
	_____	_____
		Narrative description of request detailing reasons for the request and how it is consistent with amendment criteria
	_____	_____
		Map of property depicting property lines and proposed changes to the Town's Land Use Plan Map
	_____	_____
		If proposed change involves potential increase in land use density, sewer calculations demonstrating that the change would not exceed the sewer capacity planned for the subject property

2	<u>LAND USE MAP AMENDMENT DRAWING REQUIREMENTS:</u>	
	Planning Department Checklist	*Applicant Checklist
	_____	_____
		Drawing shall be legible and accurately drawn to an appropriate scale
	_____	_____
		Indication of drawing scale and symbol designating true north
	_____	_____
		Existing and proposed land use depiction boundaries clearly shown
	_____	_____
		Existing and proposed Growth Management Area boundaries clearly shown
	_____	_____
		Property address, legal description (<i>township, range, section, lot, block, subdivision</i>) or location depicted on a detailed vicinity map



APPLICATION FORM

1 The Town of Windsor Planning Department reserves the right to reject incomplete submittals, per the application checklist. Please submit completed application and materials to planningtechs@windsorgov.com. Staff will review the submittal and advise you of its completeness for processing.

2 **Project Name*:** _____
Legal Description*: _____
Address/Location*: _____

3 **OWNER:**
Name(s)*: _____
Company: _____
Address*: _____
Phone #*: _____ Email*: _____

APPLICANT (Owner or Owner's Representative):
Name*: _____
Company: _____
Address*: _____
Phone #*: _____ Email*: _____

AUTHORIZED REPRESENTATIVE:
Name: _____
Company: _____
Address: _____
Phone #: _____ Email: _____

4 All correspondence will only be sent to those listed above. It is the sole responsibility of those listed to distribute correspondence to other applicable parties.

I hereby depose and state under the penalties of perjury that all statements, proposals, and/or plans submitted with or contained within the application are true and correct to the best of my knowledge.

Signature: _____ **Date:** _____
(Proof of owner's authorization is required with submittal if signed by Applicant)

Print Name: _____



ADDITIONAL PROPERTY OWNER SIGNATURES

5

PROPERTY OWNERS:

OWNER:

Name*: _____

Company: _____

Address*: _____

Phone #*: _____ Email*: _____

Signature*: _____ Date: _____

OWNER:

Name*: _____

Company: _____

Address*: _____

Phone #*: _____ Email*: _____

Signature*: _____ Date: _____

OWNER:

Name*: _____

Company: _____

Address*: _____

Phone #*: _____ Email*: _____

Signature*: _____ Date: _____

OWNER:

Name*: _____

Company: _____

Address*: _____

Phone #*: _____ Email*: _____

Signature*: _____ Date: _____

**Required fields*