

Request for Certificate Application

Please type or print clearly. Illegible applications will not be accepted. Case #: _____

Contact Info	Property Owner		Applicant	
	Name:		Name:	
	Company		Company:	
	Address:	Zip:	Address:	Zip:
	Phone: ()		Phone: ()	
	Email:		Email:	
	Who shall the certificate be addressed to:			
	Name:			
	Company:			
	Address:			Zip:
Phone: ()				
Email:				
<i>The applicant will be the primary contact unless otherwise noted.</i>				
Property Info	Project Location: (address)			
	Name of Business (if any):			
	Parcel No(s):			
	Existing Zone:		Proposed Zone (if applicable):	
Project Scope	Type of Certificate:			
	<input type="checkbox"/> Certificate of Zoning Proposed/Existing Use: _____			
	<input type="checkbox"/> Non-Conforming Legal Lot of Record Lot Width: _____ feet Lot Area: _____ feet			
	<input type="checkbox"/> Non-Conforming Use Existing Use: _____ Date use began: _____			
	Is the use located within a structure: <input type="radio"/> Yes <input type="radio"/> No			
	<input type="checkbox"/> Non-Conforming Structures (Rebuild letter) Year built: _____			
	Reason for structure non-conformity: <input type="radio"/> Setbacks <input type="radio"/> Height <input type="radio"/> Lot coverage <input type="radio"/> Other: _____			
	Has the building been damaged or destroyed? <input type="radio"/> Yes <input type="radio"/> No			
	If yes, date of damage or destruction: _____			
	<input type="checkbox"/> Other: _____			

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Project Information	Provide a brief description of the proposed request: (separate narrative as Attachment A also required)	
	What is the general use of the property: <input type="checkbox"/> Commercial <input type="checkbox"/> Multi-family <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Other _____	
	Are there any other pending or recently approved Land Use applications regarding this property? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Attachments	Attachment Checklist	
	The following list of attachments are required to accompany all applications: <input type="checkbox"/> A. Detailed explanation of the request as listed above. Be specific <input type="checkbox"/> B. Pueblo County Assessor's Property Information print out (www.co.pueblo.co.us) <input type="checkbox"/> D. Additional information as required by the Administrative Official.	

Terms	By signing below, the Property Owner and Applicant are representing that each understands and agrees to the following terms:	
	1. Authorized personnel from the City of Pueblo, are hereby granted the right to enter the subject property for the purposes of reviewing and processing the application, including Certificate of Occupancy Inspections. 2. There are no known hazards or vicious animals present on the subject property. 3. All information contained in this application, is true and accurate to the best of my knowledge. 4. The City of Pueblo is under no obligation to approve the request contained in this application. No promises of approval are conveyed with the acceptance of this application. 5. It is highly recommended that a licensed surveyor complete a property survey before any construction takes place. The property owner is responsible for any construction that takes place within the boundaries of their property. The city may require any construction built outside of the property legal boundaries or within any setbacks (by intent or error), to be removed at the owners' expense.	

Signatures	Property Owner	
	Print Name:	
	Signature:	
	Date:	
	Applicant, if different from Property Owner	
	Print Name:	
Signature:		
Date:		

Office Use Only	Zoning Compliance (Completed by City Staff)		Receipt:
	Application received by:	Date:	
	Application checked for completeness by:	Date:	
	Case Manager:	Fee Paid:	
	Hearing date:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Case #:	<input type="checkbox"/> Approved w/conditions		