	<b>GENERAL DEVELOPMENT APPLICAT</b> 448 East First Street, Suite 112 Salida, CO 81201 Phone: 719-539-4555 Fax: 719-539-5271 Email: planning@cityofsalida.com	ION
1. TYPE OF APPLICATION (Check-off as appropriate)		
<ul> <li>Annexation</li> <li>Pre-Annexation Agreement</li> <li>Appeal Application (Interpret</li> <li>Certificate of Approval</li> <li>Creative Sign Permit</li> <li>Historic Landmark/District</li> <li>License to Encroach</li> <li>Text Amendment to Land Us</li> <li>Watershed Protection Permit</li> <li>Conditional Use</li> </ul>	<ul> <li>Limited Impact Review: (Type)</li> <li>Major Impact Review:</li> </ul>	
2. GENERAL DATA (To be completed by the applicant)         A. Applicant Information		
Name of Applicant:		
Mailing Address:		
_	FAX:	
Email Address:		
Power of Attorney/ Authorized Representative:		
B. Site Data		
Name of Development:		
Street Address:		
	Block Subdivision (attach description)	)
Disclosure of Ownership: List all owners' names, mortgages, liens, easements, judgments, contracts and agreements that run with the land. (May be in the form of a current certificate from a title insurance company, deed, ownership and encumbrance report, attorney's opinion, or other documentation acceptable to the City Attorney)		
I certify that I have read the applic correct to the best of my knowled	cation form and that the information and exhibits herewith su ge.	bmitted are true and
Signature of applicant/agent	Ľ	Date
Signature of property owner	1	Date