

# JEFFERSON COUNTY COLORADO

## Planning & Zoning Division

# NATURAL SURFACE TRAILS APPLICATION

			Case #	-	GP
Project Location/Name <i>(Street Address or Legal Description)</i>				Parcel ID #	
<input style="width:100%;" type="text"/>				<input style="width:100%;" type="text"/>	
Section	Township	Range	Project Acreage		
<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>		
Subdivision Name				Zoning	
<input style="width:100%;" type="text"/>				<input style="width:100%;" type="text"/>	
Description of Work					
<input style="width:100%; height: 60px;" type="text"/>					
Name of Company/Owner		Contact Name		E-mail <i>(required)</i>	
<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>	
Address					
<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
☎ Home		☎ Work		☎ Fax	
<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>	
✓ In consideration for the granting of this application by Jefferson County, I hereby give permission for County staff, County board members or County contractors to enter upon my property for the purposes of site inspection and investigation and to remove or correct any hazardous or unsafe conditions and to complete or correct any work or any portion of work not done as required by the plans submitted and approved by the County as part of this application.			Please specify any extraordinary circumstances of which staff should be aware, i.e., dogs on the site, locked gates, etc.		
<input style="width:100%; height: 40px;" type="text"/>			<input style="width:100%; height: 40px;" type="text"/>		
Owner's Signature			Date		
<input style="width:100%;" type="text"/>			<input style="width:100%;" type="text"/>		

Name of Consultant		Company Name		E-mail <i>(required)</i>	
<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>	
Address					
<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
☎ Cell		☎ Work		☎ Fax	
<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>	
Name of Contractor			Signature		
<input style="width:100%;" type="text"/>			<input style="width:100%;" type="text"/>		
Contact Name				E-mail <i>(required)</i>	
<input style="width:100%;" type="text"/>				<input style="width:100%;" type="text"/>	
Address					
<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
☎ Cell		☎ Work		☎ Fax	
<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>		<input style="width:100%;" type="text"/>	