

Parcel # \_\_\_\_\_ Reception # \_\_\_\_\_ approved date: \_\_\_\_\_

**SAGUACHE COUNTY LAND USE  
PO BOX 326 - SAGUACHE, CO 81149  
(719)655-2321 FAX (719)655-2635  
PLAT VACATION/CONSOLIDATION APPLICATION**

PROPERTY OWNER NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_

LEGAL DESCRIPTION OF PROPERTY  
\_\_\_\_\_

SUBDIVISION NAME \_\_\_\_\_

THIS REQUEST IS TO COMBINE \_\_\_\_\_ LOTS INTO \_\_\_\_\_ PARCELS CONTAINING  
\_\_\_\_\_ ACRES.

TRANSPORTATION ACCESS \_\_\_\_\_

UTILITIES PROVIDED BY:

ELECTRICITY \_\_\_\_\_

TELEPHONE \_\_\_\_\_

ADEQUATE WATER SUPPLIED BY \_\_\_\_\_ PERMIT # \_\_\_\_\_

ADEQUATE SEWAGE DISPOSAL SUPPLIED BY \_\_\_\_\_ PERMIT # \_\_\_\_\_

PROPOSED LAND USE IF VACATION IS APPROVED \_\_\_\_\_

**PLEASE SUPPLY THE FOLLOWING:**

1. A SURVEY PLAT SHOWING ALL REQUIREMENTS AND AN 8.5 x 11 INCH SURVEY COPY
2. PROOF OF OWNERSHIP
3. COUNTY ROAD ACCESS APPROVAL, IF NEEDED
4. FEE AS ESTABLISHED BY THE BOCC. \$500.00 PLUS \$50.00 PER LOT AND CERTIFIED MAILING FEE.
5. A LIST OF ALL LANDOWNERS WITHIN 500 FEET OF THE SUBJECT PROPERTY WILL BE ACQUIRED BY THE LAND USE OFFICE FOR CERTIFIED MAILINGS. CERTIFIED MAILING FEE MUST BE PAID PRIOR TO APPLICATION BEING HEARD BY PLANNING COMMISSION AND COMMISSIONERS. A STATEMENT WILL BE MAILED TO YOU.
6. ALL TAXES DUE MUST BE PAID ON ALL LOTS. (A fee of \$20.00 per lot will be charged for Certificate of Taxes due.)

**IF APPLICANT HAS NOT COMPLETED ALL REQUIREMENTS WITHIN ONE YEAR  
APPROVAL WILL BECOME VOID.**

**APPLICATION, DOCUMENTS AND FEES MUST BE RECEIVED AND PAID FORTY FIVE  
(45) DAYS PRIOR TO PLANNING COMMISSION MEETING.**

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I understand the following:

1. There may be recorded protective covenants that apply to my property. Receiving County approval does not exempt me from meeting any applicable covenants.
2. Before constructing or modifying any access from a State or County road, you must obtain an approved access permit from the appropriate authority.
3. Receiving County approval on this Vacation does not exempt me from the requirements of other applicable county requirements, including building and septic permits, or applicable state requirements including water well, plumbing and electrical permits.
4. **All Consolidations must be completed, approved and recorded by June 1 to reflect tax value changes. Any consolidation completed after the deadline date will remain individual lots until the following year. Please note the tax year is always one year behind, for example in 2000 you are being taxed for the year 1999. All current taxes owed must be paid before application is presented to County Board.**

**Application must be signed by landowner(s) only. An agent for landowner may represent landowner at County meetings only if the landowner has signed and has had the attached form notarized.**

I hereby certify that the above information is true and accurate to the best of my knowledge. I further certify that I or we are legal owner(s) of record of the property that is Vacation/Consolidation is being applied for.

Applicant need to be aware that by signing this application you are giving the Saguache County Land Use office staff permission to access your property for purposes relating to this application.

**ALL APPLICATION FEES ARE NON-REFUNDABLE**

\_\_\_\_\_  
Owner(s) \_\_\_\_\_ Date \_\_\_\_\_

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**FOR OFFICE USE ONLY**

**The Land Use Office has determined that this property is in a:**

<input type="checkbox"/>	Geologic Hazard Area	<input type="checkbox"/>	Wildfire Area
<input type="checkbox"/>	Critical Wildlife Habitat Area	<input type="checkbox"/>	Area with possible high groundwater levels
<input type="checkbox"/>	None of the above		

**Legal Description:** Quarter Section \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_  
Subdivision \_\_\_\_\_ Location \_\_\_\_\_  
Lots \_\_\_\_\_ Block \_\_\_\_\_

Application received by: \_\_\_\_\_ Date \_\_\_\_\_