



# Planning Application

# Property Owner Signature & Submittal Requirements Form

## Concept Review

All submittal items are required unless indicated otherwise by staff. To be considered complete, this checklist must accompany all of the materials listed below, in a PDF format. Failure to provide required materials will result in a returned application at which point processing will be delayed.

Submittal Item	Staff Use Only
Property Owner Signature & Submittal Requirements Form	this form
Proof of Ownership	
Detailed Narrative	
Existing Conditions Plan	
Site Plan	
Phasing Plan	as applicable
Architectural Drawings	n/a
Landscape Plan	n/a
Grading & Drainage Plan	as applicable
Utility Plan	conceptual plan
Lighting Plan	n/a
Other	proposed zoning plan, other supporting information

**ALL Property Owner Signatures Required**

I hereby affirm that I am the lawful owner of the parcel(s) this application is concerning. I further authorize the applicant to submit this application and supporting materials for the applicable departmental review by the City of Steamboat Springs.

Laura Stoutt, manager, NE 17 3/17/24  
Name & Date Name & Date

Name &amp; Date

Name &amp; Date \_\_\_\_\_

Signature \_\_\_\_\_

Signature

**Applicant Signature Required**

I, the applicant, affirm that this application includes all the required materials to be deemed complete. I understand that if this application or any of the submittal items are incomplete or found to be insufficient, this application will be returned and not processed any further. In submitting this application, I affirm that all information contained within is true and correct. I also understand that all information provided in connection with this application is subject to public disclosure pursuant the Colorado Open Records Act.

Laura Stout  
Name & Date

Name &amp; Date

Signature \_\_\_\_\_

Signature





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Laura Stout, member manager      3/17/24  
 Name & Date      Franklin Holdings, LLC      Name & Date  
[Signature]      \_\_\_\_\_  
 Signature      Signature

### Applicant Signature Required

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Laura Stout  
 Name & Date  
[Signature]  
 Signature





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Laura Stout, member manager 3/17/24  
Name & Date Concord Partners, LP Name & Date

Signature

Signature

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Name & Date Laura Stout

Signature \_\_\_\_\_



Staff Use Only

PSM Date & Staff: 03/14/2024 BK

PSM ID: PS24-0049



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Laura Stout, member manager, 3/17/24  
Name & Date Padgett LLC, Name & Date

Signature

\_\_\_\_\_  
Signature

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Laura Stout  
Name & Date

Signature