



Custer County, Colorado  
Planning and Zoning Office  
Westcliffe, CO 81252

## Request for Vacation of Interior Lot Line(s)

Requires Administrative Review by the Planning and Zoning Office

Submit this completed application and all attachments with the appropriate application fee. The application will not be accepted unless complete. Fee is non-refundable and includes the recording of approval letter. Upon receipt of an Administrative Review Application and the required documentation, the Planning and Zoning Office staff, in consultation with the Chairman of the PC or his representative, shall review the Application to determine whether it qualifies for Administrative Review. Once eligibility has been determined, the request shall be processed. To qualify for Administrative Review, the proposal must meet the following conditions:

- Does not increase net density of the Subdivided land;
- Does not have any apparent negative impact on adjacent properties or easements;
- Does not change record acreage of existing properties;
- Conforms to the Custer County Zoning Resolution.

For Standards and Procedures of the process refer to **Section 4.6 C.2** of the Custer County Zoning Resolution.

Any correspondence and/or documents submitted concerning this application are public record.

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Land owner of record: \_\_\_\_\_  
All land owners must be listed on this application. TYPE OR PRINT LEGIBLY IN BLACK OR BLUE INK

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Home: (\_\_\_\_) \_\_\_\_\_ Business: (\_\_\_\_) \_\_\_\_\_

Cell: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

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Applicant: \_\_\_\_\_  
(If different than above)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Home: (\_\_\_\_) \_\_\_\_\_ Business: (\_\_\_\_) \_\_\_\_\_

Cell: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

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Tax schedule number for the properties: \_\_\_\_\_  
(Assigned by the County Assessor's Office - Shown on the Tax Bills)

Legal description of the properties: \_\_\_\_\_

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Property Address: \_\_\_\_\_

Size of property: \_\_\_\_\_

Zone: \_\_\_\_\_



I understand that:

- all recordings and required documentation must be completed within 90 days of approval.

I acknowledge that I am responsible for complying with the Custer County Zoning Resolution. I have read and understand the above, and the information I have provided is complete and accurate to the best of my knowledge.

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Signature of Landowner

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Date

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Signature of Applicant, if different

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Date

Make check payable to Custer County and return check and permit form to:

Custer County Planning and Zoning  
P. O. Box 203  
Westcliffe, CO 81252  
(719) 783-2669  
Planning\_zoning@CusterCountyGov.com  
CusterCountyGov.com