



APPLICATION FORM: LAND USE & ZONING

Activity No. <u>PP2014-004</u>	OFFICE USE
Base Fee \$ <u>200.00</u>	Receipt No. _____
Received By <u>CS</u>	Date <u>2/12/14</u>
Deemed Complete By <u>[Signature]</u>	Date <u>2/21/14</u>

I. PROJECT NAME Davis Family Farms Fruit Stand

II. TYPE OF REVIEW

This application form must be accompanied by the applicable submittal checklist.

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Minor Use Permit | <input type="checkbox"/> Administrative Permit | <input type="checkbox"/> Site Plan Review | <input type="checkbox"/> Conditional Use Permit (CUP) |
| <input type="checkbox"/> Sign Permit | <input type="checkbox"/> Water Body Setback Permit | <input type="checkbox"/> Pre-Application Conference | <input type="checkbox"/> Special Use Permit (SUP) |
| <input type="checkbox"/> Special Event Permit | <input type="checkbox"/> Floodplain Development Permit | <input type="checkbox"/> Zoning Amendment/Rezoning | <input type="checkbox"/> Conceptual PUD |
| <input checked="" type="checkbox"/> Administrative Amendment to CUP/SUP/PUD/Site Plan | <input type="checkbox"/> Variance | | <input type="checkbox"/> Final PUD |

III. APPLICANT

Name Lance Davis Davis Family Farms
Mailing Address 3623 G 7th Rd
City Palisade State CO Zip 81526
Phone 970-216-3667 Email davispeaches@bresnan.net

Representative / Primary Contact Lance Davis
Mailing Address Same
City Same State _____ Zip _____
Phone _____ Email _____

IV. PROPERTY OWNER

Name Mary M Barber
Mailing Address 770642
City Steamboat Spgs State CO Zip 80477
Phone _____ Email _____

V. PROPERTY INFORMATION

Property Address Point of Lot 8 and .145 acres or Lot 9 in Section 2 Township 6 north
General Location South US 40 Range 85 West
Legal Description (may be attached) _____
Parcel Identification No. (PIN) 937022003 Property Size (acres) .145 acres
Current Use AB Zoning AB
Proposed Use Roadside Fruit Stand

VI. SIGNATURES

This application form must be signed by both the applicant and legal owner of the property. Attach additional pages if necessary.

By signing below, the applicant acknowledges that all information contained on this application form and within accompanying submittals are true and correct and agrees to pay all required fees associated with this application. The base fee is indented to cover the estimated minimum staff hours to process the application. Any additional staff hours will be assessed at \$120 per hour. The applicant signing below is responsible for all additional hourly fees. Failure to pay fees may result in revocation of a permit/approval.

[Signature]
Applicant's Signature

Lance Davis
Print/type name of applicant

By signing below, the property owner authorizes the applicant to petition Routt County for approval of the submitted application.

Mary M Barber
Property Owner's Signature

Mary M Barber
Print/type name of property owner

To whom this may concern.

This will be a seasonal roadside stand selling fruits and vegetables that are grown on are farm in Palisade, CO. We will be starting approximately first week of July to mid September. We will be open on Fridays only from 10: 00 am to 6:00 pm.

Thank you
Lance & Becky Davis
Davis Family Farms

To: Whom It May Concern
From: Mary M. Barber Spousal Trust
Mary M. Barber, Owner

This is a note to give Lance Davis permission to sell Produce on the property South of Highway 40. Across from the entrance to CR. Rd # 42.

Signed:



February 12, 2014

COLORADO DEPARTMENT OF TRANSPORTATION
STATE HIGHWAY ACCESS PERMIT

CDOT Permit No. **308003**

State Highway No/Mp/Side
040 A / 128.300 / R

Permit fee
\$100.00

Date of transmittal
2/26/2008

Region/Section/Patrol
3 / 06 / 12-6 Tina Hayes

Local Jurisdiction
Routt County

The Permittee(s):

Mr. Darnay

**4001 County Road 42
Steamboat Springs, CO 80477
970-879-1657**

Applicant:

Lance Davis

**471 G. Road
Palisade, CO 81326
970-216-3667**

Ref No.:

is hereby granted permission to have an access to the state highway at the location noted below. The access shall be constructed, maintained and used in accordance with this permit, including the State Highway Access Code and any attachments, terms, conditions and exhibits. This permit may be revoked by the issuing authority if at any time the permitted access and its use violate any parts of this permit. The issuing authority, the Department and their duly appointed agents and employees shall be held harmless against any action for personal injury or property damage sustained by reason of the exercise of the permit.

Location: Located on the south side of Hwy 040A, just south of CR 42.

Access to Provide Service to:

(Land Use Code:)

985 - Seasonal Operations (Roadside Fruit Stand)

(Size or Count)

10

(Units)

DHV

Additional Information:

MUNICIPALITY OR COUNTY APPROVAL

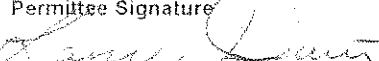
Required only when the appropriate local authority retains issuing authority.

Signature	Print Name	Title	Date

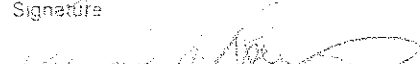
Upon the signing of this permit the permittee agrees to the terms and conditions and referenced attachments contained herein. All construction shall be completed in an expeditious and safe manner and shall be finished within 45 days from initiation. The permitted access shall be completed in accordance with the terms and conditions of the permit prior to being used.

The permittee shall notify Scott Marsh with the Colorado Department of Transportation in Grand Junction, Colorado at (970) 826-5166, at least 48 hours prior to commencing construction within the State Highway right-of-way.

The person signing as the permittee must be the owner or legal representative of the property served by the permitted access and have full authority to accept the permit and its terms and conditions.

Permittee Signature	Print Name	Date
	Lance Davis	3-4-08

This permit is not valid until signed by a duly authorized representative of the Department.
COLORADO DEPARTMENT OF TRANSPORTATION

Signature	Print Name	Title	Date (of issue)
	David Adams	Permit Manager	3-17-08

Copy Distribution:

Required:
1 Region

3 Staff Access Section

Make copies as necessary for:
Local Authority Inspector

Previous editions are obsolete and may not be used
Page 1 of 3 CDOT Form #101 5/07



40800925548-N 4960000 7550

41254658.0

420311 74570

Google

Adjacent property owners

-Stok
SHERRI K. & CLAY W. P O BOX 770546 STEAMBOAT SPGS. CO 80477-0546 PARCEL ID
937022002

CHARLES H. DUNAGIN P O BOX 880099 STEAMBOAT SPGS. CO 80488-0099 PARCEL ID
251400004

BARRY & DEBORAH SMITH P O BOX 771198 STEAMBOAT SPGS. CO 80477-1198 PARCEL ID
251400003

RAYMOND G SELBE LIVING TRUST 9741 E MONTE AVE. MESA AZ 85209-2299 PARCEL ID
937022004

STEAMBOAT 700 LLC 2200 PASEO VERDE PKWY., STE 330 HENDERSON NV 89052-2705
PARCEL ID 937022001

33%

404356 B-753 P-1495 12/31/1998 04:13P PG 1 OF 1 REC DOC
 Kay Weinland Routt County Clerk & Recorder 6.00 0.00

350
QUIT CLAIM DEED

Documentary Fee

Date 12-31-98

-6.00

THIS DEED is a conveyance from the individual(s), corporation(s), or other entity(ies) named below as **GRANTOR** to the individual(s) or entity(ies) named below as **GRANTEE** of whatever interest the **GRANTOR** may have in the real property described below.

The **GRANTOR** hereby sells and quit claims to the **GRANTEE** the real property described below with all its appurtenances subject to any reservations or restrictions shown below.

The specific terms of this deed are:

GRANTOR: MARY M. BARBER

GRANTEE: MARY M. BARBER SPOUSAL TRUST

P.O. Box 770642

(Steamboat Springs, Colorado 80477)

WEB COPY ONLY

PROPERTY DESCRIPTION:

Lot R located in Section 2, Township 6 North, Range 85 West of the 6th P.M., Routt County, Colorado.

except a parcel of land located in Section 2, Township 6 North, Range 85 West of the 6th P.M., Routt County Colorado, and more particularly described as follows: Beginning at the W $\frac{1}{4}$ corner of said Section 2; Thence S 89°20'30" E 130.34 feet to the Northerly Right of Way line of U.S. Highway 40 being 100 feet from Center Line; Thence along said R.O.W. N 37°11'17" E. 449.22 feet to the Westerly R.O.W. line of Routt County Road 542 being 30 feet from Center Line; Thence along said R.O.W. line 85°08'41" W 66.52 feet; Thence N 51°57'12" W 96.61 feet; Thence N 29°50'02" W 90.27 feet; Thence N 23°27'07" W 224.00 feet; Thence (leaving said R.O.W. line) W 210.66 feet to a point on the west line of said Section 2; Thence S 02°00'39" W. 391.28 feet to the point of beginning containing 4.172

WEB COPY ONLY

RESERVATIONS & RESTRICTIONS: Those of record

Executed by the Grantor on the 31st day of December, 1998.

Mary M. Barber
 Mary M. Barber, Grantor

STATE OF COLORADO)

Iss.

COUNTY OF ROUTT)

The foregoing instrument was acknowledged before me this 31st day of December, 1998, by Mary M. Barber.

WITNESS my hand and official seal.

My commission expires: 11/19/99

WEB COPY ONLY



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
9/5/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Colorado BW Insurance Agency, Inc. 1211 North 7th Street PO Box 4088 Grand Junction CO 81502		CONTACT NAME: Carrie Konakis PHONE (A/C No. Ext): (970) 243-9012 FAX (A/C No): (970) 241-8175 E-MAIL ADDRESS: carrie.konakis@bankofthewest.com	
INSURED Clarence & Rebecca Davis 3673 G 7/10 Rd Palisade CO 81526		INSURER(S) AFFORDING COVERAGE INSURER A: Travelers Indemnity of America INSURER B: Charter Oak Fire Ins Co INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 13-14 Master

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			7159295B327	9/7/2013	9/7/2014	EACH OCCURRENCE \$ 1,000,000
	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/>						MED EXP (Any one person) \$ 5000
	<input checked="" type="checkbox"/> Farm Liability						PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMPROP AGG \$ Included
B	AUTOMOBILE LIABILITY			BA9295B327	9/7/2013	9/7/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person) \$
	ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident) \$
							Medical payments \$ 5,000
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED						\$
	RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU-TORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Permit #PP2008-021 - Routt County Board of Commissioners are named as Additional Insured for General Liability Coverage.

CERTIFICATE HOLDER

(970) 870-5489

Routt County Board of Commissioners
Connie
PO Box 773749
Steamboat Springs, CO 80477

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Leandra Ludlam/GRJLL