Community & Economic Development Department www.adcogov.org



4430 South Adams County Parkway 1st Floor, Suite W2000B Brighton, CO 80601-8218 PHONE 720.523.6880

FAX 720.523.6967
EMAIL: epermitcenter@adcogov.org

<u>ADMINSTRATIVE USE BY SPECIAL REVIEW PERMIT – MINOR AMENDMENT</u>

Application submittals must include all documents on this checklist as well as this page. All submittals shall include one (1) electronic copy with all documents combined into a single PDF or document.

A minor amendment to an Administrative Use by Special Review (AUSR) Permit must be obtained for proposed changes to an oil and gas facility resulting in a material change to any Conditions Precedent, Conditions of Approval, Findings of Fact or any representations and commitments made by the applicant during the original AUSR process or as previously approved by Adams County.

A -	ambigation Food Amount Dug		
	procedures and access to the facility (required).		
	a. A detailed summary of the proposed change's impact on emergency response		
7.	Emergency Preparedness Plan		
6.	Sound Impact Analysis, including recommendations for mitigation where necessary (where applicable).		
5.	Operations plan a. Including an updated Site Plan and impact area map (where applicable).		
4.	Copy of Form 2A and/or Form 2 from the Colorado Oil and Gas Conversation Commission (if changed).		
	c. Summary explanation of expected impacts to surrounding areas of the proposed change(s), how the proposed modification(s) will not change the character or nature of the development, and mitigation measures where necessary.		
	b. List of all new equipment and heights to be added to the oil and gas facility with purpose, benefit, and justification for its addition (where applicable).		
	 A detailed narrative project summary describing proposed changes at the oil and gas facility and rationale for desired changes. 		
3.	Written Explanation (required)		
<u></u>	Application Fees, with proof of payment (required)		
1.	Development Application Form (required)		

Amount	Due
\$600	With application submittal
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Updated January 2023

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4430 South Adams County Parkway 1st Floor, Suite W2000 Brighton, CO 80601-8204 PHONE 720.523.6800 FAX 720.523.6998

Application Type:						
Subd	eptual Review Preliminary PU ivision, Preliminary Final PUD ivision, Final Rezone Correction/ Vacation Special Use	Temporary Use Variance Conditional Use Other:				
PROJECT NAME:						
APPLICANT						
Name(s):		Phone #:				
Address:						
City, State, Zip:						
2nd Phone #:		Email:				
OWNER						
Name(s):		Phone #:				
Address:						
City, State, Zip:						
2nd Phone #:		Email:				
TECHNICAL REPRESENTATIVE (Consultant, Engineer, Surveyor, Architect, etc.)						
Name:		Phone #:				
Address:						
City, State, Zip:						
2nd Phone #:		Email:				

DESCRIPTION OF SITE

Address:	
City, State, Zip:	
Area (acres or square feet):	
Tax Assessor Parcel Number	
Existing Zoning:	
Existing Land Use:	
Proposed Land Use:	
Have you attende	d a Conceptual Review? YES NO NO
If Yes, please list	PRE#:
under the author pertinent requirem Fee is non-refund	at I am making this application as owner of the above described property or acting rity of the owner (attached authorization, if not owner). I am familiar with all nents, procedures, and fees of the County. I understand that the Application Review dable. All statements made on this form and additional application materials are my knowledge and belief.
Name:	Date:
	Owner's Printed Name
Name:	
	Owner's Signature