



DEVELOPMENT REVIEW:
APPLICATION FORM

For Office Use Only

Date Submitted 1.30.17

Current Planning File # FDP170005 Planner PETE WRAY

Project Information

Project Name: WillMarc Medical

Project Description (Choose type of request from the list on the back):

Office and Warehouse building

Location Description/Project Address: on the NE corner of Technology

Parkway and Precision Drive

Major Cross Streets: Harmony Road and Ziegler Road

Zone District: Harmony Corridor District

Parcel Number:

Building/Unit Information

Residential: 0 Square Feet

Commercial: Office - 13,992 Square Feet

Industrial: Warehouse - 78,883 Square Feet

Building Floor Area Ratio: 0.42

Platted Area: 217,756 SF / 4.99 AC

Number of Units:

Single Family Attached: 0 Single Family Detached: 0

Two Family: 0 Multi-Family: 0

Total Number of Bedrooms Rented Separately: 0

Dates:

Conceptual Review Meeting Date March 7, 2016

Neighborhood Meeting Date TBD

Hearing Type Type II

Site/Area Information

Residential Area: 0 Sq. Ft. 0 Acres

Commercial Area: 13,992 Sq. Ft. 0.32 Acres

Industrial Area: 78,883 Sq. Ft. 1.81 Acres

Mixed Use Area: 0 Sq. Ft. 0 Acres

Right of Way Area: 12,478 Sq. Ft. 0.29 Acres

Parking and Drive Area: 48,695 Sq. Ft. 1.12 Acres

Stormwater Detention Area: 0 Sq. Ft. 0 Acres

Landscape Area: 65,415 Sq. Ft. 1.50 Acres

Open/Other Areas: Sq. Ft. Acres

Gross Area: 217,756 Sq. Ft. 4.999 Acres

Floor Area Ratio: 0.42

Gross Density: NA Net Density NA

Owner Information

Name: WillMarc Medical

Address: 224 Canyon Ave., #120

City: Fort Collins State: CO Zip: 80521

Phone: 800-685-8706 Email: www.wilmarmcmedical.com

Applicant Information

Name: Shelley La Mastra

Organization Name: Russell + Mills Studios

Contact: Shelley La Mastra

Address: 141 S College, Suite 104

City: Fort Collins State: CO Zip: 80524

Phone: 970-484-8855 Email: slamastra@russellmillsstudios.com

Preferred Method of Contact: phone or email

CERTIFICATION

I certify the information and exhibits submitted are true and correct to the best of my knowledge and that in filing this application, I am acting with the knowledge, consent, and authority of the owners of the real property, as those terms are defined in Section 1-2 of the City Code (including common areas legally connected to or associated with the property which is the subject of this application) without whose consent and authority the requested action could not lawfully be accomplished. Pursuant to said authority, I hereby permit City officials to enter upon the property for the purpose of inspection, and if necessary, for posting of public notice on the property.

Name (Please PRINT): Shelley La Mastra

Address: 141 S College, Suite 104

Telephone: 970-484-8855

Signature: (and title showing authority to sign, if applicable)

Handwritten signature of Shelley La Mastra

CERTIFICATION MUST BE SIGNED.



## Type of Request

Please indicate the type of application submitted by checking the box preceding the appropriate request(s). Additional handouts are available explaining the submittal requirements for each of the following review processes.

- Annexation Petition with Initial Zoning** REQUESTED ZONE: \_\_\_\_\_  
Fee \$1,188.00 + \$50.00 sign posting fee + \$.75 for each APO label
- Rezoning Petition** REQUESTED ZONE: \_\_\_\_\_  
Fee \$977.00 + \$50.00 sign posting fee
- Overall Development Plan (ODP)**  
Fee: \$1,599.00 + \$50.00 sign posting fee + \$.75 for each APO label
- Project Development Plan (PDP) without Subdivision Plat (also Wireless Tele-communication Facilities)**  
Fee: \$3,887.00 + \$50.00 sign posting fee + \$.75 for each APO label
- Project Development Plan (PDP) with Subdivision Plat**  
Fee: \$5,879.00 + \$50.00 sign posting fee + \$.75 for each APO label
- Final Plan without Subdivision Plat**  
Fee: \$1,000.00
- Final Plan with Subdivision Plat**  
Fee: \$1,000.00
- Modification of Standards/Text and Map Amendment**  
Fee: \$200.00+ (\$50.00 sign posting fee + \$.75 for each APO label for Modification of Standards only)
- Basic Development Review**  
Fee: \$200.00
- Major Amendment**  
Fee: \$3,206.00 + \$50.00 sign posting fee + \$.75 for each APO label
- Non-Conforming Use Review**  
Fee: \$1,389.00
- Vacation of ROW or Easement**  
Fee: \$5.00 per sheet of filing document
- Small Project Fees**  
Fee: Varies-Check with the Current Planning Department
- Street Name Change**  
Fee: \$5.00
- Extension of Final Approval**  
Fee: \$566.00
- Site Plan Advisory Review**  
NO FEE
- Addition of Permitted Use**  
Fee: \$500.00 + \$50.00 sign posting fee + \$.75 for each APO label





# Transportation Development Review Fee

Date Received Paid 02-07-2017

Total Amount Paid \$1,000.00

Project Name: Wilmarc Medical FDP170005

Project Location: NE corner of Technology and Precision

Date: \_\_\_\_\_

## Type of Submittal

Please indicate the type of application submitted by checking the box preceding the appropriate request(s).

- |  | Fee structure | amount due   |
|--|---------------|--------------|
| <input type="checkbox"/> Overall Development Plan (ODP)  | \$500 each    | _____        |
| <input checked="" type="checkbox"/> Final Development Plan (FDP)<br>This fee includes 2 rounds of review   | \$1000 each   | <u>1,000</u> |
| <input type="checkbox"/> Additional round of review  | \$ 500 each   | _____        |
| <input type="checkbox"/> Annexation<br>\$20 X _____ acres = _____ + \$250 = _____<br>The maximum fee for each annexation document/ filing shall be \$2,000 |               | _____        |
| <input type="checkbox"/> Minor Amendment   | \$158 each    | _____        |
| <input type="checkbox"/> Major Amendment   | \$2,500 each  | _____        |
| <input type="checkbox"/> Re-zone   | \$200 each    | _____        |
| <input type="checkbox"/> Modification to Land Use Code   | \$200 each    | _____        |
| <input type="checkbox"/> Wireless Telecommunication Equipment (WTE)  | \$65 each     | _____        |
| <input type="checkbox"/> Road Projects<br>_____ acres (of roadway) X \$3,500 = _____   |               | _____        |
| <input type="checkbox"/> Vacation of Easement(s) ***<br># of vacations _____ X \$400 = _____   |               | _____        |
| <input type="checkbox"/> Vacation of Right(s)-of-Way ***<br># of vacations _____ X \$800 = _____   |               | _____        |
| <input type="checkbox"/> Dedication of Easement(s) and/or Right(s)-of-Way ***<br># of dedications _____ X \$250 = _____                                    |               | _____        |

Project Development Plan (PDP) or Basic Development Review  
Project requiring Transportation Services Review and/or utility plan review.  
This fee includes 3 rounds of review.  
Detached Single Family \$160 per unit

\_\_\_\_\_ # of units X \$160 = \_\_\_\_\_

Multifamily or other residential units \$115 per unit

\_\_\_\_\_ # of units X \$115 = \_\_\_\_\_

Commercial, Industrial, Retail, and/or Non residential  
building square footage \$0.25 per square foot

\_\_\_\_\_ sq ft X \$0.25 = \_\_\_\_\_

Size of the development (area being platted or if not being  
platted size of parcel accompanying all development  
improvements) \$250 per acre \_\_\_\_\_ acres X \$ 250 = \_\_\_\_\_

Project fee \$2,000 each

\$2,000

Total of above amounts ~~\$2,000~~ 1,000

If this fee amount exceeds \$30,000 then the fee amount shall be adjusted with the following formula:  $\$30,000 + \frac{1}{2} (\text{the amount over } 30,000)$  = \_\_\_\_\_

The maximum fee for any residential ONLY project shall be \$500 per residential unit. This check should be used to verify the fee amount (does not apply to mixed-use developments). PDP fee shall be the lesser of this amount or the above calculated amount.  
\_\_\_\_\_ # of residential units X \$500 = \_\_\_\_\_

If this fee amount equals or exceeds \$65,000 then the City Manager shall have the ability to reduce the fee amount.

Reduction for affordable housing – a copy of the City letter certifying/ authorizing the affordable housing shall be provided with this application. Amount of reduction to be applied \_\_\_\_\_

Total owed for PDP \_\_\_\_\_

## General Information:

Owners Name(s): \_\_\_\_\_

Wilmarc Medical

Street address: 224 Canyon Ave.

#120

City/State/Zip: Ft. Collins, CO 80521

Telephone: ~~970~~-800-6855-6706

Applicants/ Consultants Firm Name: \_\_\_\_\_

Russell + Mills Studios

Contact: Shelley Lamastra

Street address: 141 S. College AV

Suite 104

City/State/ Zip: FORT COLLINS, CO 80524

Telephone: 970-484-8855

## Certification:

By signing this permit I acknowledge that I am acting with the knowledge, consent, and authority of the owners of the property (including all owners having legal or equitable interest in the real property, as defined in Section 1-2 of the City Code; and including common areas legally connected to or associated with the property which is the subject of this application) without whose consent and authority the requested action could not lawfully be accomplished. Pursuant to said authority, I hereby permit City officials to enter upon the property for purposes of inspection.

Name (please print): Shelley Lamastra

Signature: [Signature]

Telephone: 970-484-8855

## Foot Notes:

When a development project involves a change of use for a building, the charge per square foot shall apply to the portion of the overall building size for which the change of use is proposed, provided that the new use generates more traffic than the existing use, as determined by the current Institute of Transportation Engineers Trip Generation. If the new use does not generate more traffic than the existing use then the charge per square foot for shall apply only to the net additional building size (if any).

These fees do not include the cost of filing fees for the recording of the Development Agreement. When a Development Agreement or Amendment Agreement is entered into the Developer shall be responsible for the cost of recording the document. Said filing fees shall be calculated and provided when the signed document is returned to the City for signatures and filing.

\*\*\* This fee does not include the cost of filing fees. Filing fees shall be determined at the time of final document submittal and will be required prior to filing.

cc: Christie White, Engineering  
Development Review Engineering

**RECEIPT**

CITY OF FORT COLLINS  
 COMMUNITY DEVELOPMENT & NEIGHBORHOOD SERVICES  
 281 N. COLLEGE AVE  
 970.221.6760  
 PO BOX 580  
 970.224.6134 - fax

**Application:** FDP170005  
**Application Type:** Planning/Final Plan/NA/NA  
**Address:** FORT COLLINS, CO

Receipt No.	Ref Number	Amount Paid	Payment Date	Cashier ID	Received	Comments
266157						
Check	1282	\$2,000.00	02/02/2017	CQUEZADA		Development Review Fee: \$1000.00. Transportation Development Review Fee: \$1000.00. Paid by Wilmarc Medical, LLC 224 Canyon Ave Ste 120 Fort Collins, CO 80521

**Owner Info.:** WILMARC MEDICAL  
 224 Canyon Ave # 120  
 FORT COLLINS, CO 80521

**Project Description:** This is a request for a manufacturing and business facility. The proposed buildings include 13,992 square feet of office space (commercial) and 78,883 square feet of warehouse (industrial). The parcel is zoned (HC) Harmony-Corridor District and is situated in the Harmony Technology Park (HTP) mixed use business park.



Community Development & Neighborhood Services  
 281 N. College Ave Fort Collins, CO 80522  
 970.221.6760 970.224.6134 - fax

Permit/Project #: FDP170005  
 Applied: 01/31/2017  
 Type: Final Plan

Site Address: -

Job Valuation: \$0.00 Category:

**Transactions**

<u>Method</u>	<u>Check Number</u>	<u>Date Paid</u>	<u>Amount Paid</u>	<u>Comments</u>
Check	CK # 1282	02/02/2017	\$2,000.00	Development Review Fee: \$1000.00. Transportation Development Review Fee: \$1000.00. Paid by Wilmarc Medical, LLC 224 Canyon Ave Ste 120 Fort Collins, CO 80521

Receipt issued: 02/02/2017 Total Paid to Date: \$2,000.00

<u>Fee Description</u>	<u>Account Code</u>	<u>Fee Amount</u>	<u>Amount Paid</u>	<u>Date Paid</u>	<u>Amount Due</u>
Development Review Fee	1000.444040	\$1,000.00	\$1,000.00	02/02/2017	\$0.00
Transportation Dev Review	902010.444030	\$1,000.00	\$1,000.00	02/02/2017	\$0.00
<b>TOTAL FEES:</b>		<b>\$2,000.00</b>	<b>\$2,000.00</b>		<b>\$0.00</b>

**TOTAL BALANCE DUE AS OF 02/02/2017: \$0.00**

Fee Amounts are valid for date of this document only. Fees subject to change without notice.