

CORNERSTONE METROPOLITAN DISTRICT NOS. 1-2
Special Use Permit Application for Overweight Vehicles

APPLICANT INFORMATION

Name: _____ Phone: _____

Organization (if applicable): _____

Address: _____ City/Zip: _____

Email: _____

VEHICLE INFORMATION

TYPE OF VEHICLE: Commercial Vehicle School Bus Other: _____

Semi-Trailer Truck

LICENSE PLATE/IDENTIFICATION NUMBER #: _____ State: _____

SPECIAL USE REQUEST

PURPOSE OF REQUEST (Describe event, if applicable): _____

DATE(S) (if applicable): _____

RETURN COMPLETED APPLICATION TO:

Cornerstone Metropolitan District Nos. 1-2
c/o White Bear Ankele Tanaka & Waldron
2154 E. Commons Avenue, Suite 2000
Centennial, CO 80122

<p>This section to be completed by the District Administrator:</p> <p>Approved: _____ Denied: _____</p> <p>Reviewed by: _____</p> <p>Date: _____</p>
