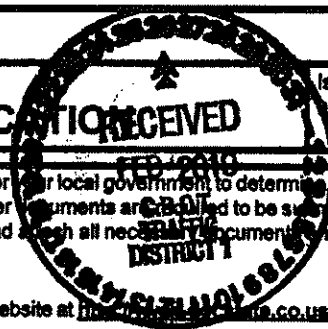


**COLORADO DEPARTMENT OF TRANSPORTATION
STATE HIGHWAY ACCESS PERMIT APPLICATION**



Issuing authority application acceptance date:

Instructions:

- Contact the Colorado Department of Transportation (CDOT) or your local government to determine your issuing authority.
- Contact the issuing authority to determine what plans and other documents are required to be submitted with your application.
- Complete this form (some questions may not apply to you) and attach all necessary documents and submit it to the issuing authority.
- Submit an application for each access affected.
- If you have any questions contact the issuing authority.
- For additional information see CDOT's Access Management website at <http://www.cdot.state.co.us/AccessPermits/Index.htm>

Please print or type

| | | | |
|--|-----------------------|---|---|
| 1) Property owner (Permittee) [Redacted] | | 2) Agent for permittee (if different from property owner) [Redacted] | |
| Street address [Redacted] | | Mailing address [Redacted] | |
| City, state & zip [Redacted] | Phone # [Redacted] | City, state & zip [Redacted] | Phone # (required) [Redacted] |
| E-mail address [Redacted] | | E-mail address if available [Redacted] | |
| 3) Address of property to be served by permit (required) [Redacted] Colorado State Highway 9, [Redacted] | | | |
| 4) Legal description of property: If within jurisdictional limits of Municipality, city and/or County, which one? county <u>Summit</u> subdivision [Redacted] block [Redacted] lot <u>Lot 12</u> section [Redacted] township <u>South</u> range <u>West</u> | | | |
| 5) What State Highway are you requesting access from? <u>State Highway 9</u> | | 6) What side of the highway? <input type="checkbox"/> N <input type="checkbox"/> S <input checked="" type="checkbox"/> E <input type="checkbox"/> W | |
| 7) How many feet is the proposed access from the nearest mile post? <u>1,100</u> feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W from: <u>M. P. [Redacted]</u> | | How many feet is the proposed access from the nearest cross street? <u>0</u> feet <input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W from: [Redacted] | |
| 8) What is the approximate date you intend to begin construction? <u>5/1/2010</u> | | | |
| 9) Check here if you are requesting a: <input type="checkbox"/> new access <input type="checkbox"/> temporary access (duration anticipated: _____) <input checked="" type="checkbox"/> improvement to existing access <input checked="" type="checkbox"/> change in access use <input type="checkbox"/> removal of access <input type="checkbox"/> relocation of an existing access (provide detail) | | | |
| 10) Provide existing property use <u>Recreation, Winter Nordic and Summer Sports</u> | | | |
| 11) Do you have knowledge of any State Highway access permits serving this property, or adjacent properties in which you have a property interest? <input checked="" type="checkbox"/> no <input type="checkbox"/> yes, if yes - what are the permit number(s) and provide copies: _____ and/or, permit date: _____ | | | |
| 12) Does the property owner own or have any interests in any adjacent property? <input checked="" type="checkbox"/> no <input type="checkbox"/> yes, if yes - please describe: _____ | | | |
| 13) Are there other existing or dedicated public streets, roads, highways or access easements bordering or within the property? <input checked="" type="checkbox"/> no <input type="checkbox"/> yes, if yes - list them on your plans and indicate the proposed and existing access points. | | | |
| 14) If you are requesting agricultural field access - how many acres will the access serve? <u>N/A</u> | | | |
| 15) If you are requesting commercial or industrial access please indicate the types and number of businesses and provide the floor area square footage of each. | | | |
| business/land use | | square footage | |
| business | | square footage | |
| <u>N/A</u> | | | |
| | | | |
| 16) If you are requesting residential development access, what is the type (single family, apartment, townhouse) and number of units? | | | |
| type | | number of units | |
| type | | number of units | |
| <u>N/A</u> | | | |
| | | | |
| 17) Provide the following vehicle count estimates for vehicles that will use the access. Leaving the property then returning is two counts. | | | |
| Indicate if your counts are <input type="checkbox"/> peak hour volumes or <input checked="" type="checkbox"/> average daily volumes. | | # of passenger cars and light trucks at peak hour volumes <u>850</u> | # of multi unit trucks at peak hour volumes |
| # of single unit vehicles in excess of 30 ft. | | # of farm vehicles (field equipment) | Total count of all vehicles <u>850</u> |

18) Check with the issuing authority to determine which of the following documents are required to complete the review of your application.

- a) Property map indicating other access, bordering roads and streets.
- b) Highway and driveway plan profile.
- c) Drainage plan showing impact to the highway right-of-way.
- d) Map and letters detailing utility locations before and after development in and along the right-of-way.
- e) Subdivision, zoning, or development plan.
- f) Proposed access design.
- g) Parcel and ownership maps including easements.
- h) Traffic studies.
- i) Proof of ownership.

1- It is the applicant's responsibility to contact appropriate agencies and obtain all environmental clearances that apply to their activities. Such clearances may include Corps of Engineers 404 Permits or Colorado Discharge Permit System permits, or ecological, archeological, historical or cultural resource clearances. The CDOT Environmental Clearances Information Summary presents contact information for agencies administering certain clearances, information about prohibited discharges, and may be obtained from Regional CDOT Utility/Special Use Permit offices or accessed via the CDOT Planning/Construction-Environmental-Guidance webpage <http://www.dot.state.co.us/environmental/Forms.asp>.

2- All workers within the State Highway right of way shall comply with their employer's safety and health policies/procedures, and all applicable U.S. Occupational Safety and Health Administration (OSHA) regulations - including, but not limited to the applicable sections of 29 CFR Part 1910 - Occupational Safety and Health Standards and 29 CFR Part 1926 - Safety and Health Regulations for Construction.

Personal protective equipment (e.g. head protection, footwear, high visibility apparel, safety glasses, hearing protection, respirators, gloves, etc.) shall be worn as appropriate for the work being performed, and as specified in regulation. At a minimum, all workers in the State Highway right of way, except when in their vehicles, shall wear the following personal protective equipment: High visibility apparel as specified in the Traffic Control provisions of the documentation accompanying the Notice to Proceed related to this permit (at a minimum, ANSI/ISEA 107-1999, class 2); head protection that complies with the ANSI Z89.1-1997 standard; and at all construction sites or whenever there is danger of injury to feet, workers shall comply with OSHA's PPE requirements for foot protection per 29 CFR 1910.136, 1926.95, and 1926.96. If required, such footwear shall meet the requirements of ANSI Z41-1999.



Where any of the above-referenced ANSI standards have been revised, the most recent version of the standard shall apply.

3- The Permittee is responsible for complying with the Revised Guidelines that have been adopted by the Access Board under the American Disabilities Act (ADA). These guidelines define traversable slope requirements and prescribe the use of a defined pattern of truncated domes as detectable warnings at street crossings. The new Standards Plans and can be found on the Design and Construction Project Support web page at: <http://www.dot.state.co.us/DesignSupport/>, then click on *Design Bulletins*.

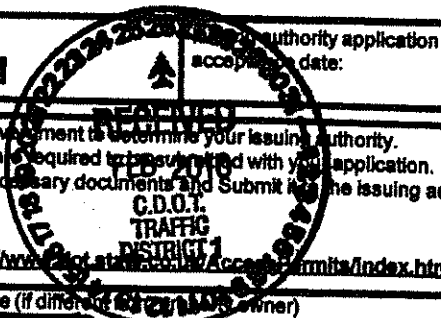
If an access permit is issued to you, it will state the terms and conditions for its use. Any changes in the use of the permitted access not consistent with the terms and conditions listed on the permit may be considered a violation of the permit.

The applicant declares under penalty of perjury in the second degree, and any other applicable state or federal laws, that all information provided on this form and submitted attachments are to the best of their knowledge true and complete.

I understand receipt of an access permit does not constitute permission to start access construction work.

| | | |
|--|--|-----------------|
| Applicant's signature  | Print name  | Date 2/11/10 |
| If the applicant is not the owner of the property, we require this application also to be signed by the property owner or their legally authorized representative (or other acceptable written evidence). This signature shall constitute agreement with this application by all owners-of-interest unless stated in writing. If a permit is issued, the property owner, in most cases, will be listed as the permittee. | | |
| Property owner signature | Print name | Date |

COLORADO DEPARTMENT OF TRANSPORTATION STATE HIGHWAY ACCESS PERMIT APPLICATION



authority application accepted date:

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Please print or type

- Contact the Colorado Department of Transportation (CDOT) or your local government to determine your issuing authority.
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1) Property owner (Permittee) _____ 2) Agent for permittee (if different from property owner) _____

Street address _____ Mailing address _____

City, state & zip _____ Phone # _____ City, state & zip _____ Phone # (required) _____

E-mail address _____ E-mail address if available _____

3) Address of property to be served by permit (required)
 _____ Colorado State Highway 9, _____

4) Legal description of property: If within jurisdictional limits of Municipality, city and/or County, which one?
 county Summit subdivision _____ block _____ lot 12 section _____ township South range West

5) What State Highway are you requesting access from?
State Highway 9

6) What side of the highway?
 N S E W

7) How many feet is the proposed access from the nearest mile post?
1,000 feet N S E W from: M. P. _____

How many feet is the proposed access from the nearest cross street?
0 feet N S E W from: _____

8) What is the approximate date you intend to begin construction?
5/1/2010

9) Check here if you are requesting a:
 new access temporary access (duration anticipated: _____)
 change in access use removal of access) improvement to existing access
 relocation of an existing access (provide detail)

10) Provide existing property use
Recreation, Winter Nordic and Summer Sports

11) Do you have knowledge of any State Highway access permits serving this property, or adjacent properties in which you have a property interest?
 no yes, if yes - what are the permit number(s) and provide copies: _____ and/or, permit date: _____

12) Does the property owner own or have any interests in any adjacent property?
 no yes, if yes - please describe: _____

13) Are there other existing or dedicated public streets, roads, highways or access easements bordering or within the property?
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14) If you are requesting agricultural field access - how many acres will the access serve?
N/A

15) If you are requesting commercial or industrial access please indicate the types and number of businesses and provide the floor area square footage of each.

| business/land use | square footage | business | square footage |
|-------------------|----------------|----------|----------------|
| <u>N/A</u> | | | |
| | | | |

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| type | number of units | type | number of units |
|------------|-----------------|------|-----------------|
| <u>N/A</u> | | | |
| | | | |

17) Provide the following vehicle count estimates for vehicles that will use the access. Leaving the property then returning is two counts.

| | | |
|---|---|--|
| Indicate if your counts are <input checked="" type="checkbox"/> peak hour volumes or <input type="checkbox"/> average daily volumes. | # of passenger cars and light trucks at peak hour volumes <u>1,750</u> | # of multi unit trucks at peak hour volumes |
| # of single unit vehicles in excess of 30 ft. | # of farm vehicles (field equipment) | Total count of all vehicles <u>1,750</u> |

1b) Check with the issuing authority to determine which of the following documents are required to complete the review of your application.

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The applicant declares under penalty of perjury in the second degree, and any other applicable state or federal laws, that all information provided on this form and submitted attachments are to the best of their knowledge true and complete.

I understand receipt of an access permit does not constitute permission to start access construction work.

| | | |
|--|--|-----------------|
| Applicant's signature  | Print name  | Date 2/11/10 |
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| Property owner signature | Print name | Date |

ACORD. CERTIFICATE OF LIABILITY INSURANCE

OP ID RF
COLUM-1

05/28/10

PRODUCER

[REDACTED]

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

[REDACTED]

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: [REDACTED]
INSURER B: [REDACTED]
INSURER C: [REDACTED]
INSURER D: [REDACTED]
INSURER E: [REDACTED]

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| FORM (RUDL) | INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|-------------|-------|---|---------------|----------------------------------|-----------------------------------|--|
| A | X | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC | 04594-19-38 | 05/01/10 | 05/01/11 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/CP AGG \$ 2,000,000 Emp Ben. 1,000,000 |
| A | | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | 04594-19-38 | 05/01/10 | 05/01/11 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$ |
| | | GARAGE LIABILITY <input type="checkbox"/> ANY AUTO | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$ |
| | | EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$ | | | | WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |
| A | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER | | | | |
| A | | Equipment Floater | 04594-19-38 | 05/01/10 | 05/01/11 | Rented Equipment \$300,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

[REDACTED]

Transportation are included as additional insured's with respects to General Liability.

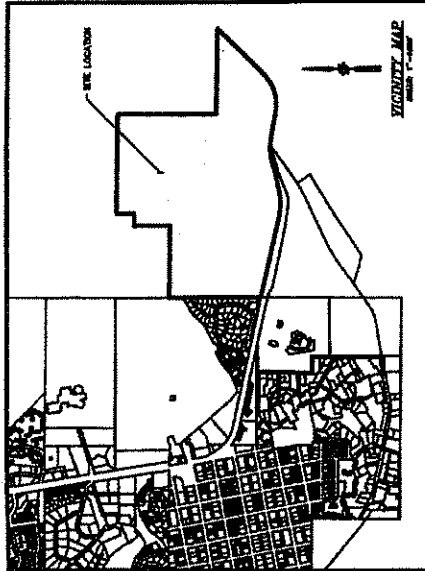
CERTIFICATE HOLDER

[REDACTED]

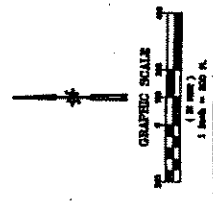
CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



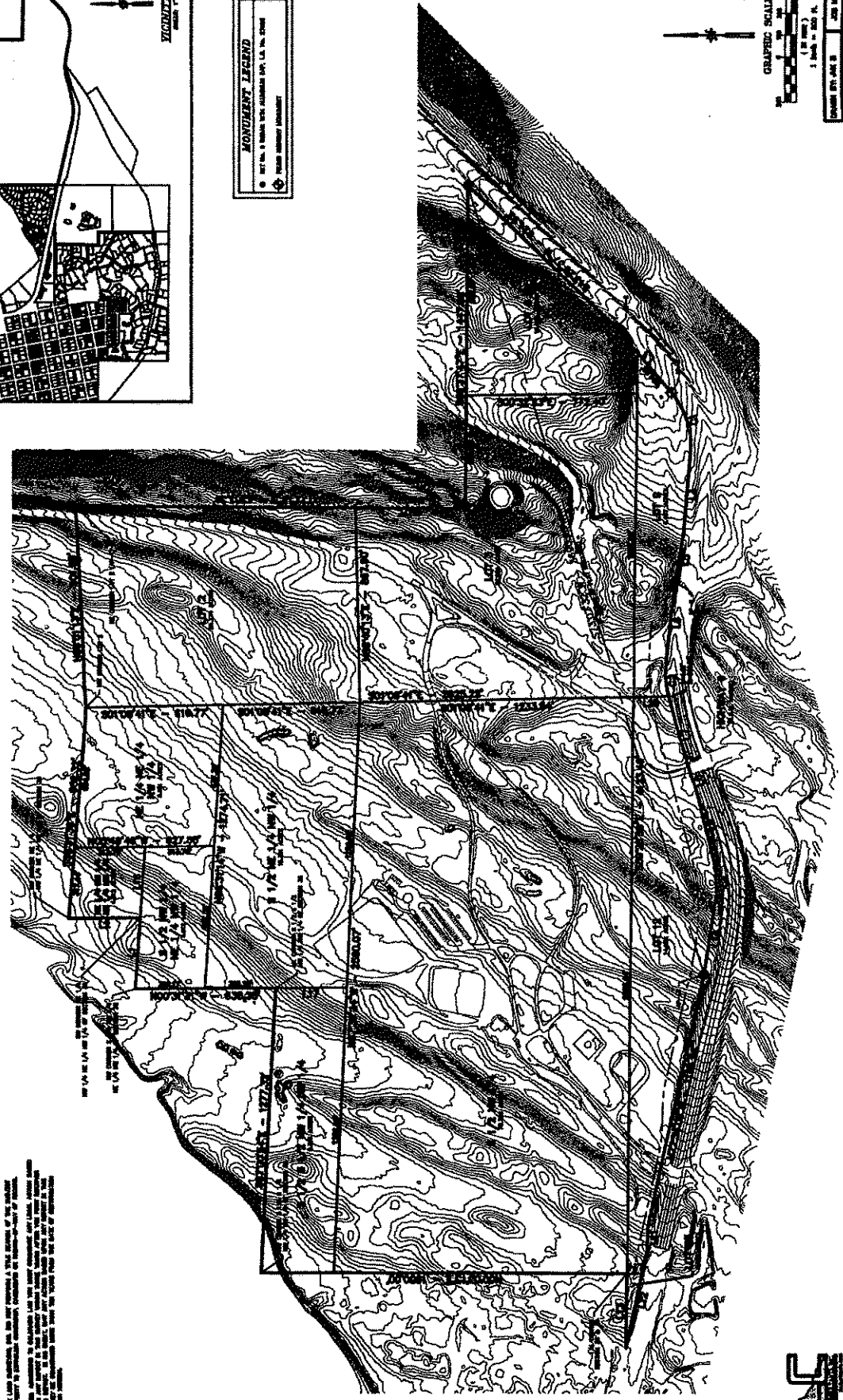
MONUMENT LEGEND
 ○ SET BY U.S. BUREAU OF LAND MANAGEMENT
 □ PRIVATE SURVEY MONUMENT



GRAPHIC SCALE
 1" = 100' (30.48 M)
 1" = 100 M
 SHEET NO. 10751
 DATE: 05/20/75
 SHEET 1 OF 1

PRELIMINARY LAND SURVEY PLAT
SECTIONS 10 AND 11 TOWNSHIP 30 SOUTH, RANGE 10 WEST, COUNTY OF SUMMIT, STATE OF COLORADO

- GENERAL NOTES:**
1. Survey was made from the corner of Section 10 and 11 Township 30 South, Range 10 West, County of Summit, State of Colorado.
 2. The survey was made on the 10th day of May, 1975, and the results are shown on this plat.
 3. The survey was made by the method of double meridian angles and the results are shown on this plat.
 4. The survey was made by the method of double meridian angles and the results are shown on this plat.
 5. The survey was made by the method of double meridian angles and the results are shown on this plat.
 6. The survey was made by the method of double meridian angles and the results are shown on this plat.
 7. The survey was made by the method of double meridian angles and the results are shown on this plat.
 8. The survey was made by the method of double meridian angles and the results are shown on this plat.
 9. The survey was made by the method of double meridian angles and the results are shown on this plat.
 10. The survey was made by the method of double meridian angles and the results are shown on this plat.



February 03, 2010

Colorado Department of Transportation
Mountain Residency

Attn: Mr. [REDACTED] and [REDACTED]
P.O. Box 399
Dumont, CO 80436

RE: SOUTH ACCESS: [REDACTED]
[REDACTED] Colorado State Highway 9, [REDACTED]

Dear [REDACTED] and [REDACTED]

Enclosed are Colorado State Highway Access Permit Applications for the proposed accesses to service the [REDACTED]. Three (3) copies of the following materials have been included with the application:

| Description | Pages | Format |
|--|-------|--------|
| CDOT Access Permit Application (Form #137) | 2 | 8.5x11 |
| Property Map | 1 | 11x17 |
| Access Permit Plans | 7 | 11x17 |
| Intersection Lighting Standards | 5 | 11x17 |
| Soils Report | 29 | 8.5x11 |
| (1) Copy Traffic Analysis | 53 | 8.5x11 |

We hope you find the application complete; however, should you require any additional materials or have any questions regarding the submittal please contact us at your convenience.

Sincerely,

[REDACTED]

Enclosures