



GROWTH MANAGEMENT ALLOCATION APPLICATION

City of Golden, Colorado

1445 Tenth St. Golden, CO 80401 ♦ (303) 384-8097 ♦ Fax (303) 384-8161

ALLOCATION PERIOD Year _____

January June End Of Year

This form is used to apply for allocations for building permits for the creation of new residential units and must be completed in order to apply for allocations. All development steps, except site plan and building permit approval, must be complete before filing this form. **Please attach a deed with this form.**

Are you aware of the allocation schedule? (Municipal Code Section 18.70)

Have you spoken to staff about this project?

Have you reviewed all municipal code that relates to your project?

1. Owner or Representative Name: _____
2. Phone: _____ Email: _____
3. Owners Address: _____ City: _____ Zip: _____
4. Address of allocation request: _____ City: _____ Zip: _____
5. How many allocations are you requesting in this allocation period: _____
6. Please provide a brief description of the project: _____

If you are applying for an ADU, please provide 2 forms of proof of primary residency

By City Council Approval Only:

7. Allocation Pool: Open Exempt Hardship Moderate Income Housing

8. Do you intend to request banking of allocations by City Council Approval? _____

If so, for how long? _____

I certify that the information and exhibits in this application are true and correct to the best of my knowledge.

Owner Signature: _____ Date: _____

Owner's Representative Signature (if applicable): _____ Date: _____

IF OWNER HAS A REPRESENTATIVE:

I hereby authorize _____ to act as my agent and representative for the purposes of submitting this allocation request. I affirm that I am the owner of record of the property for which this allocation request is submitted.

Owner Signature: _____ Date: _____

Received by _____ Planning Division on _____

Staff Use Only

Administered by: _____ Date: _____

Number of allocations awarded: _____

Allocation numbers assigned:

Date allocations awarded: _____

Number of allocations banked: _____

Date of expiration of banking: _____

If surrendered, date of surrender _____

Is this an exempt dwelling? Choose one:

Replacement

Personal Hardship Ord #: _____

School of Mines