



LAND USE APPLICATION

PROJECT NAME: Abby Dew For You

PROPERTY ADDRESS / GENERAL LOCATION: 651 Topeka Way #400 Castle Rock

LEGAL DESCRIPTION: Lot 1 Block 1 Citadel Station #4 Colorado 80109

PROJECT DESCRIPTION: Adult Daycare: home base for adults with disabilities to build independent living skills when they are not accessing the community.

STATE PARCEL NO. _____

PLEASE CHECK APPLICATION TYPE:

☐ AGREEMENT

☐ ANNEXATION

☐ CONSTRUCTION DOCUMENTS

☐ DOWNTOWN FAÇADE/VARIANCE

☐ TESC (EROSION CONTROL)

☐ LOT LINE ADJUSTMENT/VACATION

☐ PLANNED DEVELOPMENT PLAN

☐ PLANNED DEVELOPMENT PLAN AMENDMENT

☐ PLAT

☐ PLAT CORRECTION

☐ SITE DEVELOPMENT PLAN

☐ SITE DEVELOPMENT PLAN AMENDMENT

☐ SKETCH PLAN

☐ STRAIGHT ZONING

☐ TEMPORARY USE PERMIT

☒ USE BY SPECIAL REVIEW

☐ WIRELESS COMMUNICATION FACILITIES

☐ OTHER: _____

SUMMARY DATA:

Current Zoning I-2

Acreage 4.2 acres

Current Use multi-tenant/vacant

Pre-Application Meeting Date and Staff Member Name (if known)

PRE APP 25-0057

Proposed Zoning I-2

Proposed No. of Lots _____

Proposed No. of Dwelling Units or Buildings (if Commercial) _____

Proposed Building Sq.Ft. 3200 sq. feet

(tenant space)

Additional Info. _____

PROPERTY OWNER INFORMATION:

Name _____

Company KISLEV REALTY INVESTMENTS

Address 201 STEELE ST. #3-C

DENVER, CO 80206

Phone (303) 331-5522

Email WILLIAM.PENNA@AOL.COM

Property Owner Signature (Required) _____

Date 1/26/26

REPRESENTATIVE INFORMATION:

Name Abigail Dew

Company Abby Dew For You

Address 5321 Coltin Trail

Castle Rock Colorado 80104

Phone 720 333 1177

Email abbydew@abbydewforyou.com

Representative Signature (Required) _____

Date 1/26/2026

Additional names and contact information to send project comments to (e.g., engineer, architect):

Name _____

Company _____

Email _____

Name _____

Company _____

Email _____

Achieving the Community Vision through Excellence, Dedication and Service