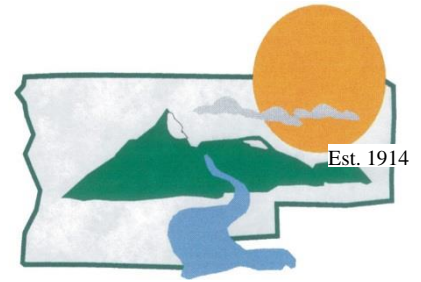


# JEFFERSON COUNTY

## COMMUNITY DEVELOPMENT DEPARTMENT

85 S.E. "D" St • Madras, Oregon 97741 • Ph: (541) 475-4462 • FAX: (541) 325-5004



*For office use only*

### DEVELOPMENT APPLICATION

Casefile Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Accela Number: 451- \_\_\_\_\_ - \_\_\_\_\_ -PLNG

Zoning District: \_\_\_\_\_

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

Date Fee Paid: \_\_\_\_\_ Recpt # \_\_\_\_\_

#### **Applicant:**

(if owner, write "Same As Owner")

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: (     ) \_\_\_\_\_

Fax: (     ) \_\_\_\_\_

Email: \_\_\_\_\_

#### **Agent/Representative:**

Name: \_\_\_\_\_

Firm: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: (     ) \_\_\_\_\_

Fax: (     ) \_\_\_\_\_

email: \_\_\_\_\_

#### **Owner(s):** (attach additional sheets if necessary)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: (     ) \_\_\_\_\_

Fax: (     ) \_\_\_\_\_

Email: \_\_\_\_\_

#### **Other:** (specify, i.e., engineer, surveyor)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: (     ) \_\_\_\_\_

Fax: (     ) \_\_\_\_\_

email: \_\_\_\_\_

List the Map and Tax Lots involved in this application:

Assessor Map:	Tax Lot No.:	Size:	Zone:	Tax Acct:
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List any other contiguous tax lots under identical ownership:

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Is the parcel(s) in Farm/Forest tax deferment? \_\_\_\_\_ Parent Parcel creation date: \_\_\_\_\_

Did the parcel(s) receive a M37/M49 approval? \_\_\_\_\_ If yes, State Claim No. \_\_\_\_\_

Site Address: \_\_\_\_\_

Existing Use of Site: \_\_\_\_\_

Description of Proposal: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**APPLICATION SUBMITTAL REQUIREMENTS:**

Your application should include the following:

1. Completed application form
2. Any supplemental information needed to show that the application complies with all approval criteria and standards.
3. Site plan drawn to scale showing property boundaries, location of all existing and proposed buildings, septic system and repair area, well, utilities and driveway (see example).
4. A copy of the most recent deed or other instrument of conveyance.
5. A copy of the tax lot deed record card for each tax lot (available from County Assessor).
6. A copy of the original or first recorded deed according to the tax lot deed record card (available from the County Clerk).
7. Signed authorization from ***all*** owners of record.
8. Application fee.

**We, the undersigned, hereby authorize the filing of this application and certify that the information contained herein is complete and true to the best of our knowledge. This also authorizes the designated Applicant and/or Agent/Representative (if applicable) to act on behalf of the property owner for the purposes of submitting this application. Further, this also authorizes Jefferson County to serve the undersigned, applicant and/or Agent/Representative in an electronic format per OAR 660-010-0025 if this matter requires such service.**

\_\_\_\_\_  
Applicant Date

Print Name: \_\_\_\_\_

\_\_\_\_\_  
Agent/Representative Date

Print Name: \_\_\_\_\_

\_\_\_\_\_  
Owner Date

Print Name: \_\_\_\_\_

\_\_\_\_\_  
Owner Date

Print Name: \_\_\_\_\_