

JACKSON COUNTY, OREGON

TYPE 1 APPLICATION

(Please print in black ink, or type all information except where a signature is required)

TYPE 1 APPLICATIONS ARE
NON-REFUNDABLE

| | |
|-------------------------------|-------|
| OFFICIAL USE ONLY | |
| File No. | _____ |
| Fee Paid | _____ |
| Receipt No. | _____ |
| App. Type | _____ |
| App. Received by | _____ |
| Date Received | _____ |
| Zoning Confirmation by Staff: | _____ |

Legal description of subject property:

Township____ Range____ Section____ Tax Lot____ Acreage____
Township____ Range____ Section____ Tax Lot____ Acreage____

Street Address of the Property: _____

What is the Zoning of the Subject Property? _____

Is the purpose of this application to complete a Measure 49 Approval? YES NO

NOTE: Applications for review and approval of all development proposals may be initiated by the property owner, purchaser under a recorded land sale contract, condemner who has been granted immediate possession by a court of competent jurisdiction, agent duly authorized in writing, or a public agency.

PROPERTY OWNER:
At Time Application is Submitted

APPLICANT:
If Other than Property Owner

| | |
|-------------------------|-------------------------|
| Name: _____ | Name: _____ |
| Mailing Address: _____ | Mailing Address: _____ |
| City: _____ | City: _____ |
| State: _____ Zip: _____ | State: _____ Zip: _____ |
| Daytime Phone: _____ | Daytime Phone: _____ |
| E-Mail Address: _____ | E-Mail Address: _____ |

AGENT:
If Other than Applicant

OTHER:
Specify: _____

| | |
|-------------------------|-------------------------|
| Name: _____ | Name: _____ |
| Mailing Address: _____ | Mailing Address: _____ |
| City: _____ | City: _____ |
| State: _____ Zip: _____ | State: _____ Zip: _____ |
| Daytime Phone: _____ | Daytime Phone: _____ |
| E-Mail Address: _____ | E-Mail Address: _____ |

IF AN AGENT, APPLICANT, OR "OTHER" IS ACTING ON BEHALF OF THE OWNER OR PURCHASER, A SIGNED STATEMENT OF OWNER AUTHORIZATION MUST BE SUBMITTED WITH THIS APPLICATION. THIS APPLICATION MUST BE ACCOMPANIED BY AN ACCURATE PLOT PLAN (MAP). SEE USER'S GUIDE FOR ASSISTANCE. THE BURDEN OF PROOF FOR APPROVAL OF AN APPLICATION RESTS WITH THE APPLICANT. YOU MUST PROVIDE DOCUMENTATION REGARDING THE PROPERTY AND APPLICATION CRITERIA IN SUFFICIENT DETAIL AND ACCURACY TO ENABLE THE DEPARTMENT TO FIND THAT YOUR APPLICATION COMPLIES WITH ALL APPLICABLE APPROVAL CRITERIA.

APPLICANT SUPPORTING INFORMATION

Describe your proposal: _____

Are Plans Attached? _____ Yes _____ No

THIS APPLICATION IS HEREBY SUBMITTED AND THE STATEMENTS AND INFORMATION HEREIN CONTAINED ARE IN ALL RESPECTS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT(S):

Print Name: _____

Print Name: _____

Signature: _____

Signature: _____

Date: _____

Date: _____

AGENT:

OWNER or CONTRACT PURCHASER:

Print Name: _____

(See Attached Form)

Signature: _____

Date: _____

CHECKLIST FOR CUSTOMER

Type 1 Permitted Uses

(LDO Use Tables 4.2-1, 4.3-1, 4.4-1, 6.2-1)

The following material must be submitted with the request. **Check off each item as you include it in your application.**

Type 1 uses are permitted by-right, requiring only non-discretionary staff review to demonstrate compliance with the standards of this Ordinance. Type 1 permits are limited to situations that do not require interpretation or the exercise of policy or legal judgment.

1. **A to-scale plot plan** (ie: 1"=100' or 1"=50') on 8 ½" x 11" paper is included in this application.
 - The plot plan includes all relevant information outlined on the plot plan instruction form included in the Type 1 application. Met _____
 - The plot plan shows applicable setbacks are met. Front _____ ft. Rear _____ ft. Side _____ ft. Met _____
 - The plot plan shows parking standards met. Met _____
 - The plot plan shows landscape/buffer yard standards met. Met _____
 - The plot plan shows access and maneuvering standards met. Met _____
 - The plot plan and all components of the required plot plan have been provided. Met _____
Met _____

2. **Description of proposal:** Written description of the activity proposed.
 - The Use #, specific use and state law reference identified in the Use Table. Met _____
 - The description of the proposal addressing the identified standards of the 'See Also' Column of the identified use table. Met _____
 - Additional findings addressing applicable overlays affecting the property. Met _____

3. **Signature:** The cover sheet and the supplemental application are signed. Met _____

4. **Checklist:** This checklist is included with the application. Met _____