

# JACKSON COUNTY, OREGON

## TYPE 4 APPLICATION - AMENDMENT

MINOR COMPREHENSIVE PLAN MAP AMENDMENT AND ZONE CHANGE

**OR**

MINOR ZONE CHANGE, NO PLAN MAP AMENDMENT REQUESTED

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

OFFICE USE ONLY	
File N°	_____
Fee Pd	_____
Receipt N°	_____
App. Type:	_____
App. Received by	_____
Date Received	_____
Comp Plan/Zoning:	_____

Current Plan Map Designation: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

**Legal description of subject property:**

Township \_\_\_\_\_

Range \_\_\_\_\_

Section \_\_\_\_\_

Tax Lot(s) \_\_\_\_\_

Proposed Plan Map Designation: \_\_\_\_\_

Proposed Zoning: \_\_\_\_\_

Date of Tax Lot Creation \_\_\_\_\_

Acreage \_\_\_\_\_

Assessor Property Class Code \_\_\_\_\_

**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: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**AGENT:**

If Other than Applicant

**OTHER:**

Specify: \_\_\_\_\_

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

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

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.

***On the following pages, describe how your application complies with the criteria identified as applicable below:***

**VIII. AMENDMENT PROCEDURES AND INSTRUCTIONS:**

- 1) The first step to file an Official Comprehensive Plan and Minor Zoning Map amendment is to schedule a Pre-Application conference. At the conference, staff will provide a copy of the criteria you need to address, as well as comments from agencies and other interested parties. The criteria includes:
  - A) Compliance with the criteria in the Jackson County Land Development Ordinance;
  - B) Compliance with the Jackson County Comprehensive Plan;
  - C) Compliance with the Statewide Planning Goals; and
  - D) Compliance with applicable Oregon Revised Statutes (ORS) and Oregon Administrative Rules (OAR).
- 2) The second step is to complete the Comprehensive Plan Map Amendment and/or Zone Change application. This application may be filed by a property owner or an authorized agent. Please answer all questions in this application as completely as possible. Not all of the questions may apply, and in those cases, please indicate does not apply (N.A.) In order to fully answer some questions, or address the required criteria, you may find it advantageous to answer the questions on a separate sheet of paper, or attach separate support documents to the application form. If so, indicate that there is an attachment, next to the question or criteria.
- 3) All applications receive preliminary review to assure that the application is complete, and sufficient information has been submitted so that the proposal can be processed. There are no statutory processing deadlines when a comprehensive plan amendment is requested. A zone change application consistent with the existing comprehensive plan map designation, where an exception to a Statewide Planning Goal is not required, is subject to statutory processing deadlines and will be processed accordingly.
- 4) The staff report and hearing packet will be mailed to you at least one week prior to the Planning Commission public hearing. Either you or your agent is required to be present. The burden of proof lies with the applicant. You must prove to the Planning Commission that your application meets all the approval criteria. You may present additional evidence or produce witnesses at the public hearing. Any exhibits entered into the record of the public hearing process must remain as part of the official record and are not returnable, unless by prior arrangement.
- 5) Written information submitted as an addendum to the application after the staff report has been prepared, or at the hearing, may result in a postponement or continuance of that hearing to allow for analysis of the newly submitted information.

***NOTE: Additional information may be submitted on 8½ 11 inch white paper***





4) Does the subject property have special assessment? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, acreage assessed: \_\_\_\_\_ Type of special assessment: \_\_\_\_\_

5) Soil types and conditions:

A) Does the property contain any of the following:

i) Agricultural Soil Class I-IV? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, please list the Class and acreage for each.

\_\_\_\_\_

ii) Forest Capability Class 2-6? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, please list the Class and acreage for each.

\_\_\_\_\_

iii) Significant Aggregate Resources? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, please list the quantity and quality of the resource.

\_\_\_\_\_

iv) Significant Mineral Resources? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, please list the quantity and quality of each resource.

\_\_\_\_\_

B) Describe soil types and characteristics: (*drainage, dwelling and road construction suitability, shrink-swell, etc.*)

\_\_\_\_\_

\_\_\_\_\_

6) Describe the on-site vegetation or landscaping: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7) Topography: (*i.e. slopes, gullies, drainage patterns*)

\_\_\_\_\_

\_\_\_\_\_

8) Does the property contain sensitive fish or wildlife habitat? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, please explain how conflicts will be mitigated.

\_\_\_\_\_

\_\_\_\_\_

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9) Does the property contain any identified wetland areas? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, please explain how conflicts will be mitigated.

\_\_\_\_\_  
\_\_\_\_\_

10) Is the property irrigated or does it have access to irrigation: Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, explain: (Acreage irrigated, name of irrigation district or source of water)

\_\_\_\_\_  
\_\_\_\_\_

11) Please list adjoining properties under the same ownership:

\_\_\_\_\_  
\_\_\_\_\_

12) Is the property subject to flooding or other natural hazards:

\_\_\_\_\_  
\_\_\_\_\_

13) What is the existing or proposed water supply? Well \_\_\_\_ Water Dist. Name \_\_\_\_\_  
Has a well been drilled? Yes \_\_\_ No \_\_\_ If well drilled, gallons per minute: \_\_\_\_\_

14) What is the existing or proposed sewage disposal system? Community System \_\_\_\_\_  
On-site System \_\_\_\_\_, # of lots served \_\_\_\_\_ Other: (please describe) \_\_\_\_\_

\_\_\_\_\_

15) Fire Protection: \_\_\_\_\_ (Name of Fire District)

A) Location of nearest fire station: \_\_\_\_\_

B) Distance to nearest fire station in miles: \_\_\_\_\_

16) Name of School District: \_\_\_\_\_

	Name	Capacity	Curr. Enrollment
Elementary School:	_____	_____	_____
Middle/Jr High School:	_____	_____	_____
High School:	_____	_____	_____

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17) Access - Status and classification of roads or other significant transportation facilities on or adjacent to the property. Also indicate whether the crossing over a railroad right-of-way is required to access the subject property: (attach any supporting traffic studies and statements from the agencies having jurisdiction over any affected transportation facilities).

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
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\_\_\_\_\_
\_\_\_\_\_

18) Minor map amendments in an Area of Special Concern (ASC) are governed by any conditions specified by LDO Chapter 7 or the Ordinance which created the ASC, or both. The following ASCs apply to this property. Please complete the attachments which include the policies and standards for these ASCs.

- 80-2 Ashland Watershed \_\_\_\_\_ 82-1 WhetstonePark \_\_\_\_\_ 82-2 Bear Creek Greenway \_\_\_\_\_
90-1 Wildlife Habitat \_\_\_\_\_ 90-2 Eagles/Osprey \_\_\_\_\_ 90-3 Jenny Cr Sucker \_\_\_\_\_
90-4 Historic Landmarks \_\_\_\_\_ 90-5 Historic Survey \_\_\_\_\_ 90-6 Archeologic Sites \_\_\_\_\_
90-7 N Fork Rogue River \_\_\_\_\_ 90-8 Groundwater \_\_\_\_\_ 90-9 Scenic Resources \_\_\_\_\_
90-10 Ecologic/Scientific \_\_\_\_\_ 93-1 Hwy 62 Corridor \_\_\_\_\_ 93-2 Transit Trunk Route \_\_\_\_\_
2003-1 Goal 11 Exception Areas \_\_\_\_\_ 2003-2 Jackson County Sports Park Noise Overlay \_\_\_\_\_

19) List previous official land use actions by application number and date:

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

IV. JACKSON COUNTY COMPREHENSIVE PLAN: As set forth in Section 3.7.3 of the Land Development Ordinance, you must develop adequate findings of fact to show compliance with the Jackson County Comprehensive Plan. Reference applicable Policy numbers here, as provided

NOTE: Additional information may be submitted on 8 1/2 11 inch white paper

by Staff at the Pre-Application conference, and describe how this request complies with these Goals and the applicable Policies on separate sheets of paper.

- 1) Aggregate and Mineral Resources: \_\_\_\_\_
- 2) Agricultural Lands: \_\_\_\_\_
- 3) Citizen Involvement: \_\_\_\_\_
- 4) Economy: \_\_\_\_\_
- 5) Energy Conservation: \_\_\_\_\_
- 6) Environmental Quality: \_\_\_\_\_
- 7) Forest Lands: \_\_\_\_\_
- 8) Goal Exceptions: \_\_\_\_\_
- 9) Housing: \_\_\_\_\_
- 10) Natural and Historic Resources: \_\_\_\_\_
- 11) Natural Hazards: \_\_\_\_\_
- 12) Population: \_\_\_\_\_
- 13) Public Facilities and Services: \_\_\_\_\_
- 14) Recreation: \_\_\_\_\_
- 15) Rural and Suburban Lands: \_\_\_\_\_
- 16) Transportation: \_\_\_\_\_
- 17) Urban Lands: \_\_\_\_\_
- 18) Mapping Criteria: Information must show that the requested plan/zoning mapping criteria are equally or more appropriate for the subject property. Refer to the Map Designations Element of the Jackson County Comprehensive Plan. Address the mapping criteria for both the existing plan map designation and the requested plan map designation. If a Goal 2 exception to a Statewide Planning Goal is indicated, provide evidence and findings to demonstrate compliance with ORS 197.732, Statewide Planning Goal 2, Part II, and any Oregon Administrative Rules, Chapter 660, found to be applicable for the requested Goal Exception. Each applicable criterion must be addressed in order for this application to be processed.

- V. **STATEWIDE PLANNING GOALS:** In order to approve an Official Comprehensive Plan and Minor Map Amendment, compliance with applicable Statewide Planning Goals must be demonstrated. Statewide Planning Goals 1 through 14 are all applicable to Jackson County. Attach additional sheets as necessary to adequately address the issues.

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- 1) Goal 1, Citizen Involvement: \_\_\_\_\_  
\_\_\_\_\_
- 2) Goal 2, Land Use Planning: \_\_\_\_\_  
\_\_\_\_\_
- 3) Goal 3, Agricultural Lands: \_\_\_\_\_  
\_\_\_\_\_
- 4) Goal 4, Forest Lands: \_\_\_\_\_  
\_\_\_\_\_
- 5) Goal 5, Open Spaces, Scenic and Historic Areas and Natural Resources: \_\_\_\_\_  
\_\_\_\_\_
- 6) Goal 6, Air, Water and Land Resources Quality: \_\_\_\_\_  
\_\_\_\_\_
- 7) Goal 7, Areas Subject to Natural Disasters and Hazards: \_\_\_\_\_  
\_\_\_\_\_
- 8) Goal 8, Recreational Needs: \_\_\_\_\_  
\_\_\_\_\_
- 9) Goal 9, Economic Development: \_\_\_\_\_  
\_\_\_\_\_
- 10) Goal 10, Housing: \_\_\_\_\_  
\_\_\_\_\_
- 11) Goal 11, Public Facilities and Services: \_\_\_\_\_  
\_\_\_\_\_
- 12) Goal 12, Transportation: \_\_\_\_\_  
\_\_\_\_\_
- 13) Goal 13, Energy Conservation: \_\_\_\_\_  
\_\_\_\_\_

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**VIII.** Are you either the owner of the property or do you have written authorization from the property owner to submit this application in their behalf?

Yes  No

PLEASE UNDERSTAND THAT THIS APPLICATION WILL NOT BE OFFICIALLY ACCEPTED UNTIL DEPARTMENT STAFF HAS DETERMINED THE APPLICATION HAS BEEN COMPLETELY FILLED-OUT AND THE MAP HAS BEEN COMPLETED CONSISTENT WITH MAPPING REQUIREMENTS AS SET FORTH WITHIN THE APPLICATION. Unless advised in writing by the Department that the application and/or map is unacceptable, the application will be officially accepted.

**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)**

Please Print Your Name: \_\_\_\_\_

Your Signature: \_\_\_\_\_

Please Print Your Name: \_\_\_\_\_

Your Signature: \_\_\_\_\_

**AGENT:** Your Signature: \_\_\_\_\_

Please provide simple directions from Medford on how to get to, and recognize, your site.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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