## Type 4 Application - Amendment

**Jackson County, Oregon**

### Type 4 Application: Amendment

**Minor Comprehensive Plan Map Amendment and Zone Change**

**Minor Zone Change, No Plan Map Amendment Requested**

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

<table>
<thead>
<tr>
<th>Current Plan Map Designation:</th>
<th>Proposed Plan Map Designation:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Zoning:</td>
<td>Proposed Zoning:</td>
</tr>
</tbody>
</table>

**Legal Description of Subject Property:**

<table>
<thead>
<tr>
<th>Township</th>
<th>Range</th>
<th>Section</th>
<th>Tax Lot(s)</th>
</tr>
</thead>
</table>

**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

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

### Applicant:

If Other than Property Owner

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

### Agent:

If Other than Applicant

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

### Other:

Specify:

- **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
II. **BASIC PROPOSAL:** Specifically identify any comprehensive plan map amendment, zone change, and associated development plan approvals requested. Also specify if an exception to any Statewide Planning Goal is requested, and outline the type and nature of the requested exception(s):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
III. **FINDINGS OF FACT PERTAINING TO THE SUBJECT PROPERTY AND SURROUNDING AREA:**

1) Describe current and historic use of the subject property:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2) List and describe any improvements that exist on the property:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

3) Describe adjacent land uses and size of parcels in the area (up to 1,000 feet of this property boundary) by tax lot:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

*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.

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

<table>
<thead>
<tr>
<th>Name</th>
<th>Capacity</th>
<th>Curr. Enrollment</th>
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</thead>
<tbody>
<tr>
<td>Elementary School: __________________________</td>
<td>______</td>
<td></td>
</tr>
<tr>
<td>Middle/Jr High School: _______________________</td>
<td>______</td>
<td></td>
</tr>
<tr>
<td>High School: ________________________________</td>
<td>______</td>
<td></td>
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</tbody>
</table>

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

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 Whetstone Park
- 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 8½ 11 inch white paper
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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: ________________________________

NOTE: Additional information may be submitted on 8½ 11 inch white paper
14) Goal 14, Urbanization: *(Note: Plan/zone changes within an urban growth boundary must be consistent with the urban growth management agreement policies mutually adopted by the applicable city and Jackson County.)*

VI. **JACKSON COUNTY LAND DEVELOPMENT ORDINANCE:** Attach findings to demonstrate the proposed changes are consistent with Section 3.7.3(C) of the Jackson County Land Development Ordinance.

VII. **CONCLUSION AND SUMMARY:** Please use this space to summarize your application. Explain why you believe approval would support the policies of the Jackson County Comprehensive Plan and be in compliance with Statewide Goals.

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

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________