



CITY OF DONALD

10710 Main Street N.E. • P.O. Box 388 • Donald, OR 97020-0388

Phone 503-678-5543 • Fax 503-678-2750

www.donaldoregon.gov

Emergency pager for Water and Sewer: 503-301-6479

Office Use Only:

Permit No. _____

Date _____

Fee _____

LAND USE ACTION APPLICATION

Donald Development Code Section 3.1

Applicant:

Name

Mailing Address

City State Zip

Phone Fax

Email

Property Owner:

(if different than Applicant)

Name

Mailing Address

City State Zip

Phone Fax

Email

Contractor:

(if applicable)

Name

Mailing Address

City State Zip

Phone Fax

Email

Location:

Street Address: _____

Map and Tax Lot No: _____

Legal Description: _____

Property Size: _____

Existing Structure/Use: _____

Description: Comp. Plan Designation: _____

Current Zoning: _____

Proposed Action: _____

Purpose and Description of Proposed Action:

Number of proposed parcels/lots: _____

Are you applying for an Expedited Land Division?

____ Yes (If yes, attach a written description of how the proposal satisfies ORS 197.360)

____ No

Applicant Name: _____ Phone: _____

Applicant Mailing Address: _____

Site Address: _____

Signature Print Name Date

Authorization and Finalization Signatures

I am the owner/authorized agent of the owner empowered to submit this application and affirm that the information submitted with this application is correct to the best of my knowledge. I further acknowledge that I have read the applicable standards for review of the land use action I am requesting and understand that I must demonstrate to the City review authorities compliance with these standards prior to approval of my request. I understand that the filing fee is nonrefundable and that I am responsible for all additional costs of processing this application in excess of the filing fee, including but not limited to, all planning, engineering, city attorney, and city administration fees and costs. I understand that no final application approval shall be given and/or building permit shall be issued until all actual costs for processing this application are paid in full.

Applicant's Signature _____ **Date** _____

Owner's Signature _____ **Date** _____



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Supplemental Materials Must Be Submitted With Application

In order to complete the processing of this application, the City of Donald requires that all pertinent material required for review of the application is submitted at the time application is made along with the application fee. If the application is found to be incomplete, review and processing of the application will not begin until the application is made complete. The submittal requirements relative to the application may be obtained from the specific sections of the Donald Development Ordinance pertaining to the application but include, at a minimum, those items outlined below.

In submitting this application, the applicant must be prepared to give evidence and information which will justify the request and satisfy all the required applicable criteria. The filing fee must be paid at the time of submission. This fee in no way assures approval of the application.

Submit one paper copy and one electronic version of the following:

- _____ A brief statement describing how the proposed action satisfies the required findings criteria contained in the Land Development Ordinance for the action requested. (Mark "Exhibit A").
- _____ Plans, with dimensions, of the proposed action (if applicable). These would include vicinity maps, plot plans, development plans, etc. For maps larger than 11x17, include 10 copies (Mark "Exhibit B").
- _____ An accurate list of names and addresses of all owners of property within 100 feet of all boundaries for a Type I action and 200 feet of all boundaries for a Type II or Type III action. The applicant assumes notification problems associated with notification lists which are more than 30 days old. (Mark "Exhibit C").
- _____ A copy of the applicable County Assessor's map. (Mark "Exhibit D").
- _____ Applicable existing conditions and proposed development plan information. (Mark "Exhibit E")

Office Use Only:

Application Received by	_____	Date	_____
Planning Dept. Review by	_____	Date	_____
Public Works Review by	_____	Date	_____
Engineer Review by	_____	Date	_____
Legal Review by	_____	Date	_____
Fire Dept. Review by	_____	Date	_____
School Dist. Review by	_____	Date	_____
Marion Co Sheriff Office Review by	_____	Date	_____

Level of Decision

Staff Approval by	_____	Date	_____
Planning Commission Approval	_____	Public Hearing Date	_____
Council Approval - 1 st Public Hearing Date	_____	2 nd Public Hearing Date	_____