



# LAND USE APPLICATION VARIANCE REQUEST

<b>Internal Use</b>			
File Number _____	Date Received _____	Deemed Complete _____	Fee _____
Type: <input type="checkbox"/> Minor Variance (Administrative) <input type="checkbox"/> Major Variance (Planning Commission)			

**Applicant / Contractor:**

Name(s) \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Legal Property Owner:** *(if different from applicant)*

Name(s) \_\_\_\_\_

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

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**Existing Property Description:**

Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ Tax Lot \_\_\_\_\_ Zoning Designation \_\_\_\_\_

Physical Address \_\_\_\_\_

Located within a UGB? \_\_\_\_\_ If yes, which city? \_\_\_\_\_

Legal Access (e.g. road name) \_\_\_\_\_

General Location \_\_\_\_\_

The Planning Director or the Planning Commission, dependent upon the criteria identified, may authorize dimensional adjustments or variances from the requirements of this ordinance, or authorize temporary use permits, where it can be shown that owing to special and unusual circumstances related to a specific lot or desired activity, strict application of the ordinance would cause an undue or unnecessary hardship. In granting these permits, Planning Director decisions would be done either under clear and objective standards; or when discretion is applied by providing notice as required by law. Those decisions identified to be approved by the Planning Commission, conditions may be attached when the Planning Commission finds it necessary to protect the best interest of the surrounding property or vicinity and otherwise achieve the purpose of this ordinance.

**Variance Type Requested:**     Area Variance     Use Variance

Please explain why the variance is requested \_\_\_\_\_

---



---



---

**Signature:** I(we), the undersigned, acknowledge that I am familiar with requirements of approval for a variance and propose to meet all standards set forth as outlined above. I certify that the statements and information provided with this application are true and correct to the best of my knowledge.

Signed: \_\_\_\_\_  
Applicant\_\_\_\_\_  
Legal Property OwnerPrinted: \_\_\_\_\_  
Applicant\_\_\_\_\_  
Legal Property Owner

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

\_\_\_\_\_

**If this application is not signed by the property owner, a letter authorizing signature by the applicant must be attached.**

**Morrow County Planning Department**  
**215 NE Main Ave, PO Box 40, Irrigon, OR 97844**  
**(541) 922-4624 FAX: (541) 922-3472**

Revised 3/4/25