

LAND USE APPLICATION ZONING PERMIT

File Number Date Receive		Received	d Date Deemed Complete		Fee	
Applicant / Con	itractor: Name(s)				
Mailing Address	s				AND THE PROPERTY OF THE PROPER	
Phone E-mail address						
Legal Owner (if	different from a	pplicant):				
Name(s)						
Property Descr	iption:					
Township	Range	Section	Tax Lot	Zoning Designa	tion	
Physical Addres	s					
Located within a UGB? If yes, which		f yes, which city?	Le	Legal Access		
Subdivision/Part	lition		Lot Width	ft Lot Dep	oth ft	
Size of Parcel		acres	Size	Size of Tract		
Proposed Set B	acks: Front	ft Side	ft Side	ft Re	ar ft	
Proposed Struct	ures: 1		Sq Ft _	Bdrms	Baths	
	2		Sq Ft _	Bdrms	Baths	
	3		Sq Ft _	Bdrms	Baths	
Plot Plan: Atta location of access	ch a plot plan sho s, septic system,	owing where on the lot th drainfield, and well if app	e structures will be locate licable. The drawing doe	d. Identify set backs, on some set of the se	existing structures, ale.	
County Zoning ar Ordinance and ar	nd Subdivision Or ny applicable Stat	dinance. I propose to me	n familiar with the standar eet all standards set forth s. I certify that the staten e.	by the County's Zoning	ı and Śubdivision	
Signed:(Applica	int / Contractor)		(Legal Owne	ır)		
Dolor Land	nt / Contractor)					
		4	(Legal Owne	•		
• •	•		a letter authorizing sign	• • • •		
Planning Approv	/ai Signature	APUNET - WORLDAW WINDOW		_ Date		
		P.O. Box 40,	y Planning Department Irriga V (544) 022 2470			
Dietribution	D Blanning D	• •	FAX: (541) 922-3472 Assessor's Office -	Conv. [] Building	Donortmont	
Distribution:	_		☐ Applicant	•	·	