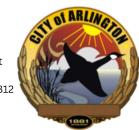
FOR OFFICE USE ONLY

Application #:_	
Date Received:	_

(541) 454- 2743 500 W. 1st Street P.O. Box 68 Arlington, OR 97812



City of Arlington Conditional Use Permit Application PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

PROPERTY OWNER AND APPLICANT INFORMATION

Applicant Name				
Address				
Mailing Address	(if different)			
City		State	zZip Code	
Email				
Property Owner				
Phone				
Address				
City		State	Zip Code	
Email				
PROPERTY DESCRIPTION Location (address, intersection, general area):				
Map #	Township	Range	Section	
Tax Lot(s)				
			Block	
Lot(s)#		Zoning		

Present Land Use			
SPECIFIC REQUEST: Please describe the propose	New Construction al in detail:	Alteration	Change of Use
-			
A Conditional Use Permit is circumstances exist:	nay be granted only in	the event that <u>all</u>	of the following
Describe in detail how the and the objectives of the Zo			
Describe in detail how to characteristics, the proposation value, and (c) appropriate of area compared to the impart	al will have minimal adv development of abutting	erse impact on th gproperties and tl	e (a) livability, (b) ne surrounding

Describe in detail how the location and design of the site and structures for the proposal will be as attractive as the nature of the use and its setting warrants.
Describe in detail how the proposal will preserve assets of particular interest to the community.
Describe in detail how the applicant has a bona fide intent and capability to develop and use the land as proposed and has some appropriate purpose for submitting the proposal, and is not motivated solely by such purposes as the alteration of property values for speculative purposes.

TO COMPLETE THIS APPLICATION, PLEASE SUBMIT THE FOLLOWING:

	JOODMII IIILI OLLOWING.
Complete application: signed Application fee Proof of ownership Letter of authorization signed Building permit application Photos/elevation drawings of Height of proposed structure Flood elevation certificate (if ODOT access permits (if appl Site plan – showing location, novice sketch of the project management of the project man	located in floodplain) icable) intent, and design of a project. A professional or nust include but is not limited to: lot Proposed fences/height Street names accessing lot Driveway location Off-street parking Utilities Flood plain (if applicable) Cut/fill (if applicable) Cut/fill (if applicable) c undersigned certifies that he/she has read and rements stated above. Please note: if the applicant the application regarding ownership, authority to or any other fact material relied upon in making a g upon notice to the applicant and subject to an elare the application void. See application, the City may rely upon professional all planning fees listed in the City Fee Schedule are ged the deposit or actual planning costs, whichever to be issued with any outstanding balances. ted to, advertising/public notice, mailings, legal evices, filings and engineering costs identified with roccess or after a final decision is rendered by either folls send a final invoice to the applicant. Building
staff or City Council, the City w	
Applicant:	Date:
Signature	Date:
Property Owner :Signature	Date:
Digitature	