

FOR OFFICE USE ONLY

Application #: _____

Date Received: _____

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



**City of Arlington
Pre-Application Form**

Please fill in the form below, City Staff will then determine the necessary land use actions necessary to complete your project.

PROPERTY OWNER AND APPLICANT INFORMATION

Applicant Name _____

Phone _____

Address _____

Mailing Address (if different) _____

City _____ State _____ Zip Code _____

Email _____

Property Owner _____

Phone _____

Address _____

Mailing Address (if different) _____

City _____ State _____ Zip Code _____

Email _____

PROPERTY DESCRIPTION

Location (address, intersection, general area): _____

Map # _____ Township _____ Range _____ Section _____

Tax Lot(s) _____

Subdivision Name _____ Block _____

Lot(s)# _____ Zoning _____

Present Land Use _____

PROJECT DESCRIPTION

Describe proposed project _____

PLOT PLAN

Please submit a plot plan showing location, intent, and design of a project. A professional or novice sketch of the project must include but is not limited to:

- | | |
|------------------------|-----------------------------|
| Position on the lot | Proposed fences/height |
| Lot dimensions | Street names accessing lot |
| Setbacks | Driveway location |
| Proposed structures | Off-street parking |
| Existing structures | Utilities |
| Existing easements | Flood plain (if applicable) |
| Existing fences/height | Cut/fill (if applicable) |

Please list any specific questions you would like answered by City Staff

Applicant: _____ Date: _____
Signature