



Office: Kalapuya Building 4500 SW Research Way Corvallis, OR 97333 (541) 766-6819

www.co.benton.or.us/cd

LAND USE APPLICATION

	COND	ITIONAL USE	PERMIT				
File # LU (OFFICE USE ONLY)			Fee	: \$10,000 deposit. (SEE CURRENT FEE SCHEDULE)			
ALL SECTIONS MUST BE COMPLETED BY OWNER, OWNER'S AGENT or APPLICANT. ATTACH ADDITIONAL SHEETS AS NECESSARY. COUNTY REVIEW WILL BEGIN WHEN THE APPLICATION IS DETERMINED TO BE COMPLETE.							
I. Property Owner Information	<u>1</u>						
Name(s):				Phone #1:			
Mailing Address				Phone #2:			
City:	State:	Zip:	Email:				
II. Applicant Information (skip Name(s):				Phone #1:			
Mailing Address:				Phone #2:			
City:	State:	Zip:	Email:				
Other individuals to be notif	ied of this app	lication: Name,	Address, City & Zip, c	or Email			

III. Property Information

Assessor's Map & Tax Lot Number: T_____S, R___W, Section(s)_____, Tax Lot(s)_____

Acreage:_____Zoning:______Fire District:_____

Water Supplied By:______Sewage Disposal Type:_____

Existing Structures:_____

Current use(s) of the property:_____

V.	Request Summary (Example: "Conditional Use approval to operate a commercial kennel in the RR Zone.")						
	Attached Documentation: With all land use applications, the "burden of proof" is on the applicant to demonstrate how the proposal complies with the Benton County development code and other law. It is important that you provide ALL the information listed on the following pages at the time you submit your application. The processing of your application will not begin until the application is determined to be complete.						
Cor	ditional Use Criteria Please answer each question in detail on a separate sheet of paper. BOP Attached.						
1.	Describe how the proposed use will not seriously interfere with uses on adjacent property, with the character of the area, or with the purpose of the zone.						
2.	Describe how the proposed use will not impose an undue burden on any public improvements, facilities, utilities, or services available to the area.						
3.	If the property is zoned Exclusive Farm Use (EFU) or Forest Conservation (FC), describe how the proposed use will not force a significant change in accepted farm or forest practices on surrounding lands devoted to farm or forest use.						
1.	If the property is zoned EFU or FC, describe how the proposed use will not significantly increase the cost of accepted farm or forest practices on surrounding lands devoted to farm or forest use.						
5.	Will the proposed use involve the use of water (plumbing facilities, bathroom, water for processing, etc.)? If yes:						
	a. Is there an existing well or spring on the proposed parcel(s)? Please attach a copy of a well log or pump test, if available, which identifies the rated yield of this water source.						
	b. Is there an existing septic system on the proposed parcel(s)? An evaluation by Environmental Health may be required of an existing system unless the system was recently installed or repaired. Please attach a copy of any septic system records you may have available.						
õ.	Is the only access or proposed access to the property via a road that crosses a railroad? If yes, please draw the location on your map and explain here:						

Mitigating Measures Please answer in detail on a separate sheet of paper.

1. Describe any special measures you propose to undertake in order to minimize impacts on adjacent properties and public services, and to ensure compliance with the purpose of the zone. Consideration may be given to such features as: location of the use on the parcel; road capacities in the area; driveway location; parking area; on-site traffic circulation; landscape or fencing separations; size of structures; signs; exterior lighting; noise; air emissions; drainage and more. **BOP Attached.**

Attachments

- 1. A copy of deed(s) covering the subject property. **BOP, Exhibit 25.**
- 2. A copy of all easements or other instruments granting access to any proposed parcel that does not have frontage on a public road. **N/A.**
- 3. An accurate scale drawing of the property, showing the locations of existing and proposed structures, roads, water supply, subsurface sewage system, easements, and driveways. Label all tax lots. **See BOP.**

Signature(s)

Assessed Prop	perty Value Notice					
This action or any future related action(s), if approved, may result in a change to my property valuation, and therefore the tax amount I pay annually. I will contact the Assessor's Office at 541-766-6855 to discuss and understand potential property tax impacts.						
☐ I understand						
I hereby certify that I am the legal owner or contract purchaser of the above noted property; that the information contained herein is accurate to the best of my knowledge; and that the requested conditional use permit would not violate any deed restrictions <u>attached to</u> the property.						
170						
Owner/Contract Purchaser Signature		Date				
Owner/Contract Purchaser Signature		Date				
For Office Use Only						
Date Application Received:	Receipt Number:	Ву:				
File Number Assigned:	Planner Assigned:					
Date Application Deemed Complete:						