CONDITIONAL USE PERMIT APPLICATION

City of Central Point Planning Department

DATE STAMP
FOR OFFICE USE ONLY

APPLICANT INFORMATION:
Name: _____
Address: _____
City:_____ State: _____ Zip Code: _____
Telephone: Business: _____ Residence: _____
E-mail Address: _____

AGENT INFORMATION:
Name: _____
Address: _____
City:_____ State: _____ Zip Code: _____
Telephone: Business: _____ Residence: _____
E-mail Address: _____

OWNER OF RECORD: (Attach Separate Sheet If More Than One):
Name: _____
Address: _____
City:_____ State: _____ Zip Code: _____
Telephone: Business: _____ Residence: _____

PROJECT DESCRIPTION:
Township: _____ Range: _____ Section: _____ Tax Lot(s): _____
Township: _____ Range: _____ Section: _____ Tax Lot(s): _____
Zoning District: _____
Total Acreage: _____

Pre-application File No.: _____
NOTE: For Type III Applications, a pre-application meeting is required.

REQUIRED SUBMITTALS:

- ☐ Application Form
- ☐ Application Fee (See Current Fee Schedule)
- ☐ Legal Description
- ☐ Written Authority from Property Owner if Agent in application process
- ☐ A scale drawing of the site and improvements proposed (3 copies)
- ☐ Reduced copy of drawing of site and proposed improvements (8 ½ x 11)
- ☐ Mailing labels for all properties within 100 foot perimeter of project
- ☐ Findings of Fact demonstrating compliance with Chapter 17.76.040

I HEREBY STATE THAT THE FACTS RELATED IN THE ABOVE APPLICATION AND THE PLANS AND DOCUMENTS SUBMITTED HEREWITH ARE TRUE, CORRECT, AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

I certify that I am the: ☐ Property Owner or ☐ Authorized Agent of Owner of Project Site

Signature: _____ Date: _____

If any wetlands exist on the site, it is the applicant's responsibility to apply for a permit to the Division of State Lands before any site work begins.

FOR PLANNING DEPARTMENT USE ONLY
Application Accepted As Complete on:_____ Land Use Case File No. _____
120th Day for Land Use or Limited Land Use Decision: _____
Wetlands Check: _____